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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 7/1/2009 , and ending 6/30/2010

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization: UJA FEDERATION OF NO NEW JERSEY, INC

Doing Business As:

Number and street (or P O box if mail is not delivered to street address): 50 EISENHOWER DRIVE

Room/suite:

City or town, state or country, and ZIP + 4: PARAMUS NJ 07652

D Employer identification number: 20-1195592

E Telephone number: 201-820-3900

G Gross receipts $: 50,078,320

F Name and address of principal officer: David Gad-Harf, Interim Exec V Pres, 50 Eisenhower Drive, Paramus, NJ

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

I Tax-exempt status: ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www ujanni org

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2004

M State of legal domicile: NJ

Part I Summary

1 Briefly describe the organization's mission or most significant activities

UJA Federation of Northern New Jersey adds value by providing the leadership necessary to create a strong, collaborative, caring and vibrant Jewish community in northern New Jersey and abroad

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	103
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	103
5	Total number of employees (Part V, line 2a)	5	88
6	Total number of volunteers (estimate if necessary)	6	2,000
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	11,241,528	12,033,927
9	Program service revenue (Part VIII, line 2g)	1,099,969	634,758
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-4,698,718	1,510,527
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	471,741	281,245
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,114,520	14,460,457
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,267,904	5,666,033
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	4,964,840	4,197,992
16a	Professional fundraising fees (Part IX, column (A), line 11e)	39,963	16,836
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,481,192		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	2,580,387	2,489,819
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	13,853,094	12,370,680
19	Revenue less expenses Subtract line 18 from line 12	-5,738,574	2,089,777

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	59,952,867	61,229,130
21	Total liabilities (Part X, line 26)	33,350,276	31,531,589
22	Net assets or fund balances Subtract line 21 from line 20	26,602,591	29,697,541

Part II Signature Block

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

Sign Here

David Gad-Harf — 5/16/11

Signature of officer — Date

DAVID GAD-HARF, INTERIM EXECUTIVE VICE-PRESIDENT

Type or print name and title

Paid Preparer's Use Only

Preparer's signature | Date | Check if self-employed ▶ ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 | EIN ▶ | Phone no ▶

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission.
See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes [ ] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 6,292,452 including grants of $ 5,666,033) (Revenue $ 0)
Grants and allocations are given by UJA Federation to over 240 501(c)(3) organizations which provide humanitarian, social service, cultural, and educational needs locally, nationwide and around the world.

4b (Code) (Expenses $ 348,443 including grants of $ 0) (Revenue $ 169,229)
UJANNJ's Jewish Educational Services operates a teacher resource center, and provides expert consultation on school programs and other issues affecting day schools, regional schools and congregational schools. JES early childhood seminars, teacher recruitment and Jewish educational enrichment programs such as the Melton adult education program help enhance the quality of Jewish education in northern New Jersey.

4c (Code) (Expenses $ 329,595 including grants of $ 0) (Revenue $ 83,226)
UJANNJ's Jewish Community Relations Council conducts programs on Israel Affairs, International Jewry, domestic concerns including Bergen Reads, interfaith brotherhood, and Holocaust remembrance and awareness throughout the community Our Mitzvah Day is a community-wide day of volunteer activities that mobilize nearly 1,500 volunteers of all ages to work to better the community.

4d Other program services. (Describe in Schedule O.)
(Expenses $ 1,135,880 including grants of $ 0) (Revenue $ 342,172)

4e **Total program service expenses** ▶ 8,106,370

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any 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	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	X	
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	X	
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	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *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	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.* (Yes: X / No:)	12A	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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? *If "Yes," complete Schedule F, Part I*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		X
17	Did the organization report 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	X	
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	X	
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	X	
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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	X	
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 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	X	
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 lines 24b through 24d and complete Schedule K If "No," go to line 25*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
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		X
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		X
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		X
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		X
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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
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	X	
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

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	1a	29		
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	X	
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	2a	88		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
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		X
b	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
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		
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	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	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	N/A		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	X	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
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		X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	N/A		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	N/A		
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a	N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	N/A		
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	N/A		

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a	103		
b	Enter the number of voting members that are independent	1b	103		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9a		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, 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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NJ

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☒ Upon request

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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► TAXPAYER (201) 820-3900
50 EISENHOWER DR, PARAMUS, NJ 07652

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 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, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Howard Charish Exec VP, Asst Secretary	34+	X		X	X	X		248,400	0	22,294
David Gad-Harf Assoc Exec VP	34+				X			155,887	0	16,782
Robin Greenfield CFO	34+				X			133,181	0	26,651
Stuart Himmelfarb Chief Marketing Officer	34+				X			117,876	0	13,101
David Moss Asst Exc VP--Endowment	34+				X			151,129	0	869
Board of Trustees										
Alan Scharfstein President	-			X				0	0	0
Jeffrey Bolson Treasurer	-			X				0	0	0
Joan Kreiger Asst Treasurer	-			X				0	0	0
Philip Moss Secretary	-			X				0	0	0
Leslie Billet Vice President	-			X				0	0	0
Gail Billig Vice President	-			X				0	0	0
David J. Goodman Vice President	-			X				0	0	0
Sue Ann Levin Vice President	-			X				0	0	0
Dr. Zvi Marans Vice President	-			X				0	0	0
Jayne Petak Vice President	-			X				0	0	0

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Daniel M Shlufman, Esq Vice President	-	X		X				0	0	0
David Smith Vice President	-	X		X				0	0	0
Jan Seligman Weiss Vice President	-	X		X				0	0	0
Wilson Aboudi Trustee	-	X						0	0	0
Dana Post Adler Trustee	-	X						0	0	0
Laurie Bader Trustee	-	X						0	0	0
Barry Badner Trustee	-	X						0	0	0
Adolph Berman Trustee	-	X						0	0	0
Dr Lawrence Berman Trustee	-	X						0	0	0
Ellen Bernstein Trustee	-	X						0	0	0
David Bindelglass Trustee	-	X						0	0	0
Gale S. Bindelglass Trustee	-	X						0	0	0
Myrna Block Trustee	-	X						0	0	0
1b Total ▶								806,473	0	79,697

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 5

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
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	X	
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		X

Section B. Independent Contractors

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
NONE		0
		0
		0
		0
		0

2 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

Part VIII Statement 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
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a	0				
	b Membership dues	1b	0				
	c Fundraising events	1c	2,872,666				
	d Related organizations	1d	0				
	e Government grants (contributions)	1e	0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,161,261				
	g Noncash contributions included in lines 1a-1f $		1,000,565				
	h **Total.** Add lines 1a–1f		▶	12,033,927			
Program Service Revenue		Business Code					
	2a Grant Income			356,091	356,091		
	b Community Programs Income			238,536	238,536		
	c Programming Events			40,131	40,131		
	d			0			
	e			0			
	f All other program service revenue			0			
	g **Total.** Add lines 2a–2f		▶	634,758			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		▶	643,141			643,141
	4 Income from investment of tax-exempt bond proceeds		▶	0			
	5 Royalties		▶	0			
		(i) Real	(ii) Personal				
	6a Gross Rents	68,901					
	b Less rental expenses	34,077					
	c Rental income or (loss)	34,824	0				
	d Net rental income or (loss)		▶	34,824			34,824
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	36,193,998	0				
	b Less cost or other basis and sales expenses	35,326,612	0				
	c Gain or (loss)	867,386	0				
	d Net gain or (loss)		▶	867,386			867,386
	8a Gross income from fundraising events (not including $ 2,872,666 of contributions reported on line 1c) See Part IV, line 18	a	190,344				
	b Less direct expenses	b	257,174				
	c Net income or (loss) from fundraising events		▶	-66,830			-66,830
	9a Gross income from gaming activities See Part IV, line 19	a	16,089				
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities		▶	16,089			16,089
	10a Gross sales of inventory, less returns and allowances	a	0				
	b Less: cost of goods sold	b	0				
	c Net income or (loss) from sales of inventory		▶	0			0
	Miscellaneous Revenue		Business Code				
	11a Administrative fee income		561000	257,408			257,408
	b Miscellaneous revenues		900099	39,754			39,754
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d		▶	297,162			
	12 **Total revenue.** See instructions.		▶	14,460,457	634,758	0	1,791,772

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	5,666,033	5,666,033		
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	923,417	142,717	471,964	308,736
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	2,693,866	1,138,754	636,886	918,226
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9 Other employee benefits	309,573	105,079	93,651	110,843
10 Payroll taxes	271,136	107,154	74,894	89,088
11 Fees for services (non-employees)				
a Management	0			
b Legal	1,989		1,989	
c Accounting	70,580		70,580	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	16,836			16,836
f Investment management fees	87,618		87,618	
g Other	240,490	238,840	1,650	
12 Advertising and promotion	111,403	60,481	39,329	11,593
13 Office expenses	168,192	56,232	105,715	6,245
14 Information technology	22,088	3,433	18,155	500
15 Royalties	0			
16 Occupancy	230,370	76,257	154,113	
17 Travel	17,211	12,599	4,612	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	20,520	6,538	11,752	2,230
20 Interest	49,446	19,507	29,939	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	307,983	109,536	198,447	0
23 Insurance	65,869	18,810	47,059	
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)				
a Functions & Missions	11,008			11,008
b Program Services	268,856	268,856		
c Bad Debt	518,177		518,177	
d Administration Expenses	111,456	31,685	78,657	1,114
e Equipment Rental	75,925	20,708	55,217	
f All other expenses	110,638	23,151	82,714	4,773
25 **Total functional expenses.** Add lines 1 through 24f	12,370,680	8,106,370	2,783,118	1,481,192
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		2,312,163	2	1,898,582
	3	Pledges and grants receivable, net		9,049,701	3	7,536,372
	4	Accounts receivable, net		362,694	4	187,074
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	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 Schedule L		0	6	0
	7	Notes and loans receivable, net		76,500	7	76,000
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		44,503	9	48,581
	10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D	10a 9,741,713			
	b	Less accumulated depreciation	10b 1,269,236	8,786,941	10c	8,472,477
	11	Investments—publicly traded securities		38,987,013	11	42,648,402
	12	Investments—other securities See Part IV, line 11		0	12	0
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		333,352	15	361,642
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		59,952,867	16	61,229,130
Liabilities	17	Accounts payable and accrued expenses		1,039,741	17	924,709
	18	Grants payable		6,894,850	18	4,647,354
	19	Deferred revenue		14,012	19	0
	20	Tax-exempt bond liabilities		5,000,000	20	4,400,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		16,253,838	21	17,668,465
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		132,663	23	126,391
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities Complete Part X of Schedule D		4,015,172	25	3,764,670
	26	**Total liabilities.** Add lines 17 through 25		33,350,276	26	31,531,589
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		18,551,235	27	21,563,923
	28	Temporarily restricted net assets		8,051,356	28	8,133,618
	29	Permanently restricted net assets		0	29	0
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		26,602,591	33	29,697,541
	34	Total liabilities and net assets/fund balances		59,952,867	34	61,229,130

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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 separate 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		X
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		X

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
UJA FEDERATION OF NO NEW JERSEY, INC	20-1195592

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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

5 ☐ 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)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III–Functionally integrated d ☐ Type III–Other

e ☐ 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)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

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

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
									0
									0
									0
									0
									0
Total									0

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

Section A. Public Support

Calendar 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.")	17,741,718	22,446,657	15,887,483	10,685,249	11,949,927	78,711,034
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0				0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
4 **Total.** Add lines 1 through 3	17,741,718	22,446,657	15,887,483	10,685,249	11,949,927	78,711,034
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						8,572,219
6 **Public support.** Subtract line 5 from line 4						70,138,815

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	17,741,718	22,446,657	15,887,483	10,685,249	11,949,927	78,711,034
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	706,032	696,803	820,028	618,087	712,042	3,552,992
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	904,258	1,121,465	948,816	1,422,109	931,920	5,328,568
11 **Total support.** Add lines 7 through 10						87,592,594

12 Gross receipts from related activities, etc (see instructions) **12** 0

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ► ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . .	**14**	80 07%
15	Public support percentage from 2008 Schedule A, Part II, line 14 . .	**15**	80 17%

16a **33 1/3% support test–2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ► ☒

b **33 1/3% support test–2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . ► ☐

17a **10%-facts-and-circumstances test–2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . ► ☐

b **10%-facts-and-circumstances test–2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a ,or 17b, check this box and see instructions ► ☐

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

(Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	0	0				0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	0	0				0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0				0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
6 **Total.** Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 **Public support** (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0				0
13 **Total support.** (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	0 00%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	0 00%
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18	0 00%

19a **33 1/3% support tests–2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33 1/3% support tests–2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

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

SCHEDULE A, Part II, Section A, B - Support

Fiscal Year	FY06	FY07	FY08	FY09	FY10	
Form 990 Year	2005	2006	2007	2008	2009	Total
Line 10 Other Income	col (a)	col (b)	col (c)	col (d)	col (e)	col (f)
Program Service Revenue	489,154	494,073	575,541	1,099,969	634,758	3,293,495
Admin Fee Income	387,654	591,062	313,852	263,398	257,408	1,813,376
Miscellaneous	27,449	36,330	59,423	58,742	39,754	221,698
Other Revenues	415,104	627,392	373,275	322,140	297,162	2,035,074
Line 10, Other Income	904,258	1,121,465	948,816	1,422,109	931,920	5,328,569

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.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO. NEW JERSEY, INC

Employer identification number

20-1195592

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	116	427
2	Aggregate contributions to (during year)	976,123	1,701,657
3	Aggregate grants from (during year)	1,145,081	2,296,096
4	Aggregate value at end of year	9,918,572	32,409,466

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] Yes [ ] No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7. N/A

1 Purpose(s) of conservation easements held by the organization (check all that apply).

[ ] Preservation of land for public use (e g , recreation or pleasure) [ ] Preservation of an historically important land area

[ ] Protection of natural habitat [ ] Preservation of a certified historic structure

[ ] Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ----------

4 Number of states where property subject to conservation easement is located ▶ ----------

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ----------

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ----------

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8 N/A

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ----------

(ii) Assets included in Form 990, Part X ▶ $ ----------

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ----------

b Assets included in Form 990, Part X ▶ $ ----------

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c	Beginning balance	1c 0
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f 0

2a Did the organization include an amount on Form 990, Part X, line 21? ☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	38,623,204	52,369,912			
b	Contributions	2,677,780	1,864,396			
c	Net investment earnings, gains, and losses	4,980,368	-11,094,053			
d	Grants or scholarships	3,441,177	4,180,702			
e	Other expenditures for facilities and programs	0	0			
f	Administrative expenses	512,137	336,349			
g	End of year balance	42,328,038	38,623,204			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ 82%
- b Permanent endowment ▶ %
- c Term endowment ▶ 18%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by.

		Yes	No
(i)	unrelated organizations	3a(i)		X
(ii)	related organizations	3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	2,282,711		2,282,711
b	Buildings	0	6,668,370	827,937	5,840,433
c	Leasehold improvements	0	0	0	0
d	Equipment	0	783,489	434,156	349,333
e	Other	0	7,143	7,143	0
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶					8,472,477

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
Financial derivatives	0	
Closely-held equity interests	0	
Other	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12.)* ▶	0	

Part VIII Investments—Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13.)* ▶	0	

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
Due from affiliates	213,080
Security deposit	13,209
Deferred Bond Issuance Cost	135,353
	0
	0
	0
	0
	0
	0
	0
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	361,642

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
Federal income taxes	0
Gift Annuities Payable	3,764,670
	0
	0
	0
	0
	0
	0
	0
	0
	0
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	3,764,670

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,460,457
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,370,680
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	2,089,777
4	Net unrealized gains (losses) on investments	4	1,005,173
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	1,005,173
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	3,094,950

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	15,584,862
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	1,005,173		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	206,850		
e	Add lines 2a through 2d			2e	1,212,023
3	Subtract line 2e from line 1			3	14,372,839
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	87,618		
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	87,618
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12)*			5	14,460,457

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	12,489,912
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	206,850		
e	Add lines 2a through 2d			2e	206,850
3	Subtract line 2e from line 1			3	12,283,062
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	87,618		
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	87,618
5	Total expenses Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18)*			5	12,370,680

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, 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

Part V Line 4 ------UJA has a policy of distributing annually 5% of endowment assets at fair market value to support UJA's programs, and support programs of the organization's beneficiary agencies and other 501(c)(3) organizations.

Part XII Line 2d -----Amounts included on Line 1, Total Revenues per audited financial statements, but not on Form 990, Part VII, Line 12 Fundraising Events Expenses as Offset to Income from Fundraising Events - 257,174, Rental Expenses as Offset to Rental Income - 34,077; Inter-company elimination between the Operating Fund and Endowment which is

Part XIV Supplemental Information *(continued)*

included in the total revenues per the financial statements, but eliminated between the two funds for tax purposes on the Form 990 - (84,401)

Part XIII Line 2d ----Amounts included on Line 1, Total Expenses per the audited financial statements, but not on Part IX, Line 25: Same as above reconciling items

Part IV Line 2a -----UJA Federation as custodian, provides endowment management and investment services to beneficiary, non-profit organizations located in northern New Jersey Ownership of the assets of the beneficiary agencies are retained by the respective agencies and are commingled for investment purposes with the assets of UJA Federation In exchange for services provided by UJA Federation, agencies pay an administrative fee

Schedule F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO. NEW JERSEY, INC.

Employer identification number

20-1195592

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	1	1	Program services	See Sch F, Pg 4, Part IV	52,638
Middle East and North Africa	0	0	Investment--St of Israel Bds		0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
	0	0			0
Totals ▶	1	1			52,638

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

Schedule F (Form 990) 2009

(HTA)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information

Part I Line 2(e), 3 -----The UJA Federation of Northern New Jersey operates a small office in Israel. The purpose of the office is to monitor programs in Israel sponsored by UJA Federation, prepare reports and assessments about these projects, and respond to community leaders' questions regarding continuing and/or new programs. There maybe other di minimis costs related to the foreign office for activities performed by UJA, but are not significant and have not been included. The costs are borne by UJA as well as by another Federation

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization
UJA FEDERATION OF NO. NEW JERSEY, INC

Employer identification number
20-1195592

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.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply

a [X] Mail solicitations
b [X] Internet and email solicitations
c [X] Phone solicitations
d [X] In-person solicitations
e [X] Solicitation of non-government grants
f [X] Solicitation of government grants
g [X] Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [X] Yes [ ] No

b 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

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Siegal Marketing Group	Tele-funding services		X	54,654	16,838	37,816
				0	0	0
				0	0	0
				0	0	0
				0	0	0
				0	0	0
				0	0	0
				0	0	0
				0	0	0
				0	0	0
Total ▶				54,654	16,838	37,816

3 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

NJ

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a List events with gross receipts greater than $5,000

		(a) Event #1 Supr Sunday Telthon (event type)	(b) Event #2 Leadership Kick-off (event type)	(c) Other events 18 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	978,941	319,599	1,764,470	3,063,010
	2 Less Charitable contributions	978,941	318,780	1,574,945	2,872,666
	3 Gross income (line 1 minus line 2)	0	819	189,525	190,344
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	55,058	55,058
	7 Food and beverages	0	0	0	0
	8 Entertainment	0	0	0	0
	9 Other direct expenses	26,899	2,080	173,137	202,116
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(257,174)
	11 Net income summary Combine line 3, column (d), and line 10 ▶				-66,830

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue			16,089	16,089
Direct Expenses	2 Cash prizes				0
	3 Noncash prizes				0
	4 Rent/facility costs				0
	5 Other direct expenses				0
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☒ Yes 50 00% ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				(0)
	8 Net gaming income summary Combine line 1, column d, and line 7 ▶				16,089

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities NJ		
a	Is the organization licensed to operate gaming activities in each of these states? 9a	X	
b	If "No," explain		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a		X
b	If "Yes," explain:		
11	Does the organization operate gaming activities with nonmembers? 11		X
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 12		X

			Yes	No
13	Indicate the percentage of gaming activity operated in.			
a	The organization's facility	13a — %		
b	An outside facility	13b 100 00%		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.			
	Name ▶ In-house Event Activity			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		X
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 of the third party.			
	Name ▶ N/A			
	Address ▶			
16	Gaming manager information.			
	Name ▶ N/A			
	Gaming manager compensation ▶ $ 0			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		X
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $			

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number

20-1195592

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

Part II 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 Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Abraham Joshua Heschel School	13-3091539		15,000				Gen'l Core Support
New York, NY							
American Friends of Hebrew University	13-1568923		7,000				"
New York, NY							
American Friends of the Israel Museum	23-7182582		51,000				"
New York, NY							
Arnold P Gold Foundation	22-3052098		15,250				"
Englewood Cliffs, NJ							
Ben Porat Yosef	22-2368804		6,675				"
Paramus, NJ							
Bergen Academy for Reform Judaism	22-2917401		7,656				"
Ridgewood NJ							
Bergen County H S of Jewish Studies	22-2267197		25,168				"
Hackensack, NJ							
Bergen County Y a JCC	22-1487394		83,722				Gen'l Core Support
Washington Township, NJ			9,278				Economic Crisis
Birthright Israel Foundation	13-4092050		218,960				Gen'l Core Support
New York, NY							
Boys Town Jerusalem Fdn of America	11-5324002		10,183				"
New York, NY							
Breast Cancer Research Foundation	13-3727250		50,700				"
New York, NY							
Camp Ramah in the Berkshires	13-1997276		27,250				"
Englewood, NJ							

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶ 246

3 Enter total number of other organizations . . . . . ▶ 0

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number

20-1195592

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Congregation Kehilath Jeshurun	13-1656644		5,250				Gen'l Core Support
New York, NY							
Congregation Machzikei Hadas-Belz	13-3158602		10,000				"
Monsey, NY							
Crohn's + Colitis Fdn of America	13-6193105		30,000				"
New York, NY							
Daughters of Miriam Center	22-1500504		76,300				"
Clifton, NJ							
Des Moines University	42-0730347		10,000				"
Des Moines, IA							
Englewood Hospital Medical Ctr Fdn	22-3367281		24,500				"
Englewood Cliffs, NJ							
Fair Lawn High School	22-6001795		6,000				"
Fair Lawn, NJ							
Friends of Ofanim	20-2749756		8,000				"
Wynnewood, PA							
Friends of Yad Lakashish	76-0734439		6,000				"
Englewood, NJ							
Frisch School	22-1937461		22,785				"
Paramus, NJ							
Gerrard Berman Day School (GBDS)	22-2635691		42,040				"
Oakland, NJ							
Jewish Ass'n-Develop Disabilities	22-2842847		11,156				"
Hackensack, NJ							
Jewish Education for Special Children	52-1586927		8,000				"
River Edge, NJ							
Jewish Family Service-Bergen Cty	22-2223109		390,341				Gen'l Core Support
Teaneck, NJ			37,192				Economic Crisis

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO NEW JERSEY, INC.

Employer identification number

20-1195592

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jewish Family Service-No Jersey	22-1487228		321,160				Gen'l Core Support
Wayne, NJ			40,075				Economic Crisis
Jewish Federation-Palm Beach Cty	59-0948696		30,400				Gen'l Core Support
Palm Beach, FL							
Jewish Federation of the Berkshires	04-2131409		23,500				"
Pittsfield, MA							
Jewish Home & Rehabilitation Center	22-3466678		108,850				"
Rockleigh, NJ							
Jewish Home Fdn-No Jersey Inc	52-1720580		31,400				"
Rockleigh, NJ							
Jewish National Fund	13-1659627		20,000				"
New York, NY							
Johns Hopkins University	20-0595110		7,000				"
Baltimore, MD							
Joint Distribution Committee	13-1656634		483,328				"
New York, NY							
Kaplen JCC on the Palisades	22-1487220		174,927				Gen'l Core Support
Tenafly, NJ			17,884				Economic Crisis
Kennedy Funding Invitational Corp	20-4912684		10,250				Gen'l Core Support
New City, NY							
League School	11-1714376		10,000				"
Brooklyn, NY							
Ma'ayanot	22-3383708		7,735				"
Teaneck, NJ							
Masorti Fdn-Conservative Judaism	13-1810938		35,000				"
New York, NY							
Moriah School	22-1766272		30,450				"
Englewood, NJ							

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number

20-1195592

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Morse Life Foundation	65-0329966		10,000				Gen'l Core Support
West Palm Beach, FL							
NJ State Assn of Jewish Feds	22-1487222		46,664				"
Union, NJ							
P E F Israel Endowment Funds	13-6104086		5,500				"
New York, NY							
Potomac Ridge Behavior Health Fdn	20-5479860		10,000				"
Rockville, MD							
Rutgers University Foundation	23-7318742		15,000				"
New Brunswick, NJ							
Schechter Institutes, Inc	22-3342043		7,200				"
Willow Grove, PA							
Sinai Special Needs Institute	22-2942402		25,694				"
Tenafly, NJ							
Solomon Schechter Day Schl-Bergen	23-7370024		38,600				"
New Milford, NJ							
Syracuse University	15-0532081		40,000				"
Syracuse, NJ							
Temple Emanu-El of Closter	22-1589223		23,800				"
Closter, NJ							
Temple Sinai of Bergen County	22-1606208		11,000				"
Tenafly, NJ							
Torah Academy	22-2890836		8,645				"
Teaneck, NJ							
Washington Institute-Near East Policy	52-1376034		10,000				"
Washington, DC							
Yavneh Academy	22-1613659		23,940				"
Paramus, NJ							

SCHEDULE I-1 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number

20-1195592

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Yeshiva of North Jersey	22-1526652		28,980				Gen'l Core Support
River Edge, NJ							
Yeshivat Noam	22-3722875		21,132				"
Paramus, NJ							
YM-YWHA of North Jersey	22-1493179		74,654				Gen'l Core Support
Wayne, NJ			21,243				Economic Crisis
Jewish Federations of North America	13-1624240		2,066,790				Gen'l Core Support
New York, NY							
JFNA is the central funding agency to which UJA Federation donates approx one third of all grants to support the efforts of JFNA which are to protect and enhance the lives of Jews and Jewish communities in North America, Israel and around the world							

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 Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		

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

Part IV Line 2 ----Every year agencies requesting funding present their plans, goals, needs and financial data to the Planning & Allocations Committee. This committee deliberates and reviews all submitted information. This committee then makes a recommendation to the Board of Trustees as to how to allocate the funds available. The Board of Trustees meet in May every year to review and approve allocations. Because the agency recipients are located locally and known to UJA Federation, UJA maintains a close relationship with the agencies enabling UJA to monitor the progress of the agencies' projects and programs for which the monies were allocated. The UJA staff and volunteers work closely on numerous projects with the agencies in many aspects.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number

20-1195592

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	☐ First-class or charter travel		
	☐ Travel for companions		
	☐ Tax indemnification and gross-up payments		
	☐ Discretionary spending account		
	☐ Housing allowance or residence for personal use		
	☐ Payments for business use of personal residence		
	☐ Health or social club dues or initiation fees		
	☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b		N/A
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? 2		N/A
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☒ Compensation committee		
	☐ Independent compensation consultant		
	☒ Form 990 of other organizations		
	☒ Written employment contract		
	☒ Compensation survey or study		
	☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? 4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement? 4c		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? 5a		X
b	Any related organization? 5b		X
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? 6a		X
b	Any related organization? 6b		X
	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		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III 8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? 9		N/A

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is 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)(i)–(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Howard Charish	(i)	248,400	0	0	7,079	15,215	270,694	0
	(ii)	0	0	0	0	0	0	133,800
David Gad-Harf	(i)	155,887	0	0	7,000	9,782	172,669	0
	(ii)	0	0	0	0	0	0	82,488
Robin Greenfield	(i)	133,181	0	0	0	26,651	159,832	0
	(ii)	0	0	0	0	0	0	79,646
David Moss	(i)	151,129	0	0	0	868	151,997	0
	(ii)	0	0	0	0	0	0	79,333
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE J-2 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
► See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the Organization: UJA FEDERATION OF NO NEW JERSEY, INC.

Employer identification number: 20-1195592

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Robert Boiarsky Trustee	-	X						0	0	0
Rabbi Neal Borovits Trustee	-	X						0	0	0
Margot Brandes Trustee	-	X						0	0	0
Paula Cantor Trustee	-	X						0	0	0
Howard Chernin Trustee	-	X						0	0	0
Ralph Cheifetz Trustee	-	X						0	0	0
David Cohen Trustee	-	X						0	0	0
Martha Cohen Trustee	-	X						0	0	0
Martin Cohen Trustee	-	X						0	0	0
Dr Leonard Cole Trustee	-	X						0	0	0
Ruth Cole Trustee	-	X						0	0	0
Amy Cushmaro Trustee	-	X						0	0	0
Edward J Dauber, Esq. Trustee	-	X						0	0	0
Stacey Distell Trustee	-	X						0	0	0
Julius Eisen Trustee	-	X						0	0	0
Lawrence Eisen Trustee	-	X						0	0	0
Bambi Epstein Trustee	-	X						0	0	0
Carl Epstein Trustee	-	X						0	0	0
Jodi Epstein Trustee	-	X						0	0	0
Merle Fish Trustee	-	X						0	0	0
Esther Fishman Trustee	-	X						0	0	0

SCHEDULE J-2 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the Organization
UJA FEDERATION OF NO. NEW JERSEY, INC

Employer identification number
20-1195592

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Laura Freeman Trustee	-	X						0	0	0
Alan M Gallatin, Esq Trustee	-	X						0	0	0
Sharyn J Galatin Trustee	-	X						0	0	0
Eva Lynn Gans Trustee	-	X						0	0	0
Dr Sandra Gold Trustee	-	X						0	0	0
Stephanie Goldman-Pittel Trustee	-	X						0	0	0
Lawrence Goodman Trustee	-	X						0	0	0
Steven Morey Greenberg, Esq. Trustee	-	X						0	0	0
Dr David Greenblatt Trustee	-	X						0	0	0
Ted Greenwood Trustee	-	X						0	0	0
Dr Bernard Hammer Trustee	-	X						0	0	0
Yona Hermann Trustee	-	X						0	0	0
Betty Hershan Trustee	-	X						0	0	0
Harry Immerman Trustee	-	X						0	0	0
Gilon Irwin Trustee	-	X						0	0	0
Arthur H Joseph Trustee	-	X						0	0	0
Dr Jeffrey Kern Trustee	-	X						0	0	0
Daniel Kirsch, Esq. Trustee	-	X						0	0	0
Laura Kirsch, Esq Trustee	-	X						0	0	0
Rena Klosk Trustee	-	X						0	0	0
Peter Kolben Trustee	-	X						0	0	0

SCHEDULE J-2 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
► See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the Organization
UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number
20-1195592

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Bernard Koster, Esq Trustee	-	X						0	0	0
Madelene Kupperman Trustee	-	X						0	0	0
Fred Lafer Trustee	-	X						0	0	0
Seth Lipshitz Trustee	-	X						0	0	0
George Liss Trustee	-	X						0	0	0
Bruce Mactas Trustee	-	X						0	0	0
Rabbi Randall Mark Trustee	-	X						0	0	0
Gregory Meisel Trustee	-	X						0	0	0
Lisa Beth Meisel Trustee	-	X						0	0	0
Rita Merendino Trustee	-	X						0	0	0
Mark Metzger Trustee	-	X						0	0	0
Linda Mirelson Trustee	-	X						0	0	0
Dr David Namerow Trustee	-	X						0	0	0
David Opper Trustee	-	X						0	0	0
Alex Paley Trustee	-	X						0	0	0
Susan Penn Trustee	-	X						0	0	0
Alvin Reisbaum Trustee	-	X						0	0	0
Jonathan Rochlin Trustee	-	X						0	0	0
Ronald Rosensweig, Esq Trustee	-	X						0	0	0
Daniel Rubin Trustee	-	X						0	0	0
Sylvia Safer Trustee	-	X						0	0	0

SCHEDULE J-2 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the Organization
UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number
20-1195592

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Karen Scharfstein Trustee	-	X						0	0	0
Norman Seiden Trustee	-	X						0	0	0
Paula Shaimann Trustee	-	X						0	0	0
Susan Sher Trustee	-	X						0	0	0
Carol Silberstein Trustee	-	X						0	0	0
Daniel Silna Trustee	-	X						0	0	0
Ava Silverstein Trustee	-	X						0	0	0
Helen Singer-Katz Trustee	-	X						0	0	0
Leon Sokol, Esq Trustee	-	X						0	0	0
Michael Starr Trustee	-	X						0	0	0
Dr Justin Straus Trustee	-	X						0	0	0
Henry Taub Trustee	-	X						0	0	0
Dr Theodore Tobias Trustee	-	X						0	0	0
Henry Voremberg Trustee	-	X						0	0	0
Arlene Weiss Trustee	-	X						0	0	0
Robert Yudin Trustee	-	X						0	0	0
Joyce Joseph Trustee	-	X						0	0	0

SCHEDULE K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).
▶ Attach to Form 990. See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UJA FEDERATION OF NO. NEW JERSEY, INC

Employer identification number
20-1195592

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No
A	Colorado Educational & Cultural Facilities Authority	84-0896727	196458 6R9	5/1/2007	6,500,000	Purchase & renovations new office building		X		X
B										
C										
D										
E										

Part II Proceeds

		A	B	C	D	E
1	Total proceeds of issue					
2	Gross proceeds in reserve funds					
3	Proceeds in refunding or defeasance escrows					
4	Other unspent proceeds					
5	Issuance costs from proceeds					
6	Working capital expenditures from proceeds					
7	Capital expenditures from proceeds					
8	Year of substantial completion					

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9	Were the bonds issued as part of a current refunding issue?										
10	Were the bonds issued as part of an advance refunding issue?										
11	Has the final allocation of proceeds been made?										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2	Are there any lease arrangements with respect to the financed property which may result in private business use?										

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization
UJA FEDERATION OF NO. NEW JERSEY, INC

Employer identification number
20-1195592

Part 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 determining revenues
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	X	87	1,000,565	Sales Value
10	Securities—Closely held stock	X			See Page 2, Part II
11	Securities—Partnership, LLC, or trust interests				
12	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				
25	Other ▶ (_____)		0	0	
26	Other ▶ (_____)		0	0	
27	Other ▶ (_____)		0	0	
28	Other ▶ (_____)		0	0	

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30 a	During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32 a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If "Yes," describe in Part II.			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Part I Line Part I, Line 9, 32b ----Valued at Market Value - Securities are sent directly by donors to pre-determined brokerage houses. The brokerage houses then sell the securities upon receipt

SCHEDULE O (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

2009

Open to Public Inspection

Name of the organization	Employer identification number
UJA FEDERATION OF NO NEW JERSEY, INC.	20-1195592

Form 990 Part VI Section B Line 11 Form 990 Review - Form 990 is prepared in-house & then reviewed by the certified public accounting firm which annually audits the financial records of UJA Federation of Northern New Jersey. Suggestions and/or changes to Form 990 are made in accordance with the tax department review. Form 990 is then forwarded to the Audit Committee of UJA Federation for their review. After their comments & suggestions are addressed, the return is remitted to the US Treasury

Form 990 Part VI Section B Line 12c Conflict of Interest Policy - Conflict of Interest Quesionnaire was distributed to all members of the Board of Trustees, Officers, Board Committee members, key employees and those employees in positions of management The questionnaires are reviewed for issues of conflict and presented to the Board Executive Committee for determination of a conflict and resolution. All new trustees or personnel complete a questionnaire upon assuming the new position

Form 990 Part VI Section B Line 15 Compensation Determination Process - The Personnel Chairman, a volunteer, under the auspices of the UJA Board of Trustees assisted by volunteers with expertise in the area of executive compensation, review surveys, studies all pertinent information of other Federations as a benchmark for the salaries and benefits of all key employees Annual performance reviews are conducted with or without salary changes All compensation changes are reviewed & authorized by the Personnel Committee All changes are then approved by the Board of Trustees

Form 990 Part VI Section C Line 19 Information is available to the public upon request.

Name of the organization: UJA FEDERATION OF NO NEW JERSEY, INC

Employer identification number: 20-1195592

PAGE 2, PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

LINE 1, The Organization's Primary Exempt Purpose:

UJA Federation of Northern New Jersey is the central fundraising and planning organization serving Jewish community of northern New Jersey It serves as the central, unifying force of the diverse Jewish population of this region and also strives to build partnerships with other communities and groups in the area UJA Federation supports over 84 beneficiary and affiliated agencies, and community services that provide humanitarian, social service, cultural, and educational needs locally, in Israel and in 60 countries around the world

LINE 2, New Program Service begun in fiscal year 2010, Kehillah Partnership Cooperative - presented below

LINE 4d, Other Program Services	Expenses	Grants	Revenues
UJANNJ's Council for Older Adults operates Kosher Means on Wheels, a nutrition site, and sponsors congregate meals in 3 locations, serving over 57,300 meals annually The Council not only provides healthy nutrition, but also companionship and socialization for elderly members of the community	301,382		205,311
UJANNJ's Synagogue Leadership Initiative provides services for rabbis and synagogue members to address a wide range of issues and challenges facing congregations in the community, such as attracting and maintaining congregation members Programs assist in areas of strategic planning, fund raising, outreach, programming, leadership development, and developing a needs assessment plan	281,305		9,277
UJANNJ's Israel Program Center operates Ulpan (Hebrew language) classes and other educational and cultural programs and events related to Israel such as our annual Israel Film Festival and the Israel at 60 anniversary celebrations in 2008, for example	246,386		68,845
Hillel of Northern New Jersey operates college campus programs at Fairleigh Dickinson University in Teaneck, Ramapo College, Bergen Community College and William Patterson University In addition, the Keep in Touch program provides services for students who attend college out of our geographic area	130,072		10,583
UJANNJ's Chaplaincy Commission provides chaplaincy services to area hospitals	69,886		48,156
Berne Fellows Leadership Program is an instensive two-year program focusing on leadership skills and Jewish learning including an overview of the history and current challenges facing northern New Jersey Jewish community and exposure to leading philanthropists and thinkers Graduates of the program are expected to intensify their commitment to Jewish life and to assume significant leadership positions in the community and beyond Two Berne Fellows, for example, have created the Klene-Up Krewe which brings groups to New Orleans to help that community rebuild from the devasation caused by Hurricane Katrina Several groups have been to New Orleans	62,457		-
The Kehillah Partnership Cooperative of UJANNJ is a program that began February, 2010 and has become very successful in saving numerous northern New Jersey Jewish community organizations including UJANNJ substantial amounts of money by combining buying power to obtain lower costs on commodities and services At June 2010 there are alomost 60 participating organizations,which have collectively saved approximately $400,000 The currernt offerings for which organizations are saving include electricity, natural gas, office supplies, shipping, credit card processing fees, and telecommunications	44,391		-
Total Other Program Services	1,135,880	-	342,172

Name of the organization	Employer identification number
UJA FEDERATION OF NO. NEW JERSEY, INC	20-1195592

SCHEDULE O – Form 990, Part VI, Section A, Question 2
Board of Trustee Relationships

TRUSTEE NAME	RELATIONSHIP
Howard Charish	Executive Director of UJA Federation of Northern New Jerse which is a paid position. Assistant Secretary to the Board of Trustees
Dr Leonard Cole	Husband of Ruth Cole
Ruth Cole	Wife of Dr Leonard Cole
Alan M. Gallatin, Esq	Husband of Sharyn Gallatin, Esq
Sharyn Gallatin	Wife of Alan M Gallatin, Esq
Eva Lynn Gans	Wife of Leo Gans
Leo Gans	Husband of Eva Lynn Gans
Harry Immerman	Brother-in-Law of Arthur Rebell
Arthur H Joseph	Husband of Joyce Joseph
Joyce Joseph	Wife of Arthur Joseph
Daniel Kirsch, Esq	Husband of Laura Kirsch, Esq.
Laura Kirsch, Esq	Wife of Daniel Kirsch, Esq
Bernard Koster, Esq	Husband of Norma Wellington
Fred Lafer	Business relationship with Henry Taub
Gregory Meisel	Husband of Lisa Beth Meisel
Lisa Beth Meisel	Wife of Gregory Meisel
Arthur Rebell	Brother-in-Law of Harry Immerman
Alan Scharfstein	Husband of Karen Scharfstein
Karen Scharfstein	Wife of Alan Scharfstein
Jason Shafron, Esq.	Son-in-Law of Daniel Silna
Daniel Silna	Father-in-Law of Jason Shafron, Esq
Henry Taub	Business relationship with Fred Lafer
Norma Wellington	Wife of Bernard Koster, Esq

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
UJA FEDERATION OF NO NEW JERSEY, INC.

Employer identification number
20-1195592

Part I Identification of Disregarded Entities

N/A

(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
			0	0	
			0	0	
			0	0	
			0	0	
			0	0	
			0	0	

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
See Attached Schedule					

Part II **Continuation of Identification of Related Tax–Exempt Organizations**

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
JEWISH ASSN FOR DEVELOPMENTAL DISABILTIES	22-2842847	(1)	NJ	501(c)(3)	7	N/A
JEWISH COMMUNITY HOUSING CORPORATION	23-7139963	(2)	NJ	501(c)(3)	9	N/A
BETH AND MARK METZGER FOUNDATION, INC.	22-2734107	supporting org	NJ	501(c)(3)	Type I	N/A
ROSNER FAMILY FOUNDATION INC	20-4384158	supporting org	NJ	501(c)(3)	Type I	N/A
SADINOFF FAMILY FOUNDATION, INC	22-2789176	supporting org	NJ	501(c)(3)	Type I	N/A
SEIDEN FAMILY FOUNDATION, INC	22-2756922	supporting org	NJ	501(c)(3)	Type I	N/A
THE HELEN & JACK LUBLINER FAMILY FDN, INC	90-0427853	supporting org	NJ	501(c)(3)	Type I	N/A
THE M M KAPLAN FAMILY FOUNDATION, INC	22-3410478	supporting org	NJ	501(c)(3)	Type I	N/A
THE PERLMAN FAMILY FOUNDATION, INC	22-3482032	supporting org	NJ	501(c)(3)	Type I	N/A
THE UJA - 2 FOUNDATION, INC.	22-3484927	supporting org	NJ	501(c)(3)	Type I	N/A
(1) Provides services and support for disabled individuals						
(2) Provides low income housing for individuals below predetermined income level						
Supporting org pertains to those foundations established to support the efforts of UJA Federation of Northern New Jersey & other 501(c)(3) org						

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

			Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to other organization(s)	1b	X	
c	Gift, grant, or capital contribution from other organization(s)	1c	X	
d	Loans or loan guarantees to or for other organization(s)	1d		X
e	Loans or loan guarantees by other organization(s)	1e		X
f	Sale of assets to other organization(s)	1f		X
g	Purchase of assets from other organization(s)	1g		X
h	Exchange of assets	1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	X	
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n	Sharing of paid employees	1n		X
o	Reimbursement paid to other organization for expenses	1o		X
p	Reimbursement paid by other organization for expenses	1p	X	
q	Other transfer of cash or property to other organization(s)	1q		X
r	Other transfer of cash or property from other organization(s)	1r		X

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) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved
(1)	BETH AND MARK METZGER FOUNDATION, INC	c	400,000
(2)	JEWISH COMMUNITY HOUSING CORPORATION	k	80,941
(3)			0
(4)			0
(5)			0
(6)			0