

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Return of Organization Exempt From Income Tax

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

20**09**

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	<u> </u>	or u	he 2009 calendar year, or tax year beginning 0 // 01, 2009, and ending		6/30,20 10
	В	heck if a	present Presse C Name of organization PINION STREET FOUNDATION	D Employer identi	fication number
		Addr		20-38954	51
	X	7	ne change print or Number and street (or P.O. box if mail is not delivered to street address) Room/	suite E Telephone numb	er
	F	┪	type. See 121 STEUART STREET	(415) 777-	0411
		┥┈┈	Specific City or town, state or country, and ZIP + 4		
	⊢		instruc- tions. SAN FRANCISCO, CA 94105-1236	G Gross receipts \$	48,930.
	⊢	retur Accel	F Name and address of principal officer: JORDANNA POLIS SCHUTZ	H(a) is this a group ret	
	_	_ pend		affiliates?	
			121 STEUART STREET SAN FRANCISCO, CA 94105	H(b) Are all affiliates in	
	<u>L</u>		exempt status: X 501(c) (3)		st (see instructions)
			site: ▶ N/A	H(c) Group exemption	
	K	Form	of organization X Corporation Trust Association Other ► L Year of	formation: 2005 M Sta	te of legal domicile. CA
	Pa	irt I	Summary		
	-	1	Briefly describe the organization's mission or most significant activities:		
			SUPPORTS CHARITABLE, EDUCATIONAL, AND RELIGIOUS PURPOSES	OF JEWISH	
	2	l	COMMUNITY FEDERATION OF SAN FRANCISCO, THE PENINSULA, MAR		
	T) del		COUNTIES.		
	Š	2	Check this box I if the organization discontinued its operations or disposed of more than 2	5% of its net assets	
	& Governance	3	Number of voting members of the governing body (Part VI, line 1a)		4
	4				2
	Activities	4		5	1
	ş	5	Total number of employees (Part V, line 2a)		
	ĕ	6	Total number of volunteers (estimate if necessary)	<u>[6</u>	
			Total gross unrelated business revenue from Part VIII, column (C), line 12		
		ь	Net unrelated business taxable income from Form 990-T, line 34		
		1		Prior Year	Current Year
	- 79	-811	Contributions and grants (Part VIII, line 1h)	0.	
R	E(§	<u> 1</u> 91	Program service revenue (Part VIII, line 29)	0.	
شئسہ	<u>-``</u> }	10	Investment Income (Part VIII, column (A), lines 3, 4, and 7d)	-1,493,715.	48,930.
1	Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
1 1	<u>Y</u> AN	2,23	Total revenue (2add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-1,493,715.	48,930.
1 "		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.
4 _	- 1873 ·	14	Benefits paid to or for members (Part IX, column (A), line 4)	-	0.
ร์ก็	GĽ		Salaries class-compensation, employee benefits (Part IX, column (A), lines 5-10)		0.
V			a Professional fundraising fees (Part IX, column (A), Ine 11e)		0.
73	Expen	l lu a	o Total fundraising expenses, Part IX, column (D), line 25)	· 	
	ă			24 206	41,323.
			Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		
ξ		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		
	_	19	Revenue less expenses Subtract line 18 from line 12		7,607.
	000			Beginning of Year	End of Year
CANNED	25	20 21	Total assets (Part X, line 16)	4,761,280.	4,890,685.
Z	₹2	21	Total liabilities (Part X, line 26)	14,291.	
Z	Ž	22	Net assets or fund balances. Subtract line 21 from line 20	4,746,989.	4,852,291.
⋖	Pa	rt II	Signature Block		
ပ္က			Under penalties of perfury, I declare that I have examined this return, including accompanying schedul	les and statements, and to	the best of my knowledge
ŲJ			and belief, it is true, correct ⊿and complete. Declaration of preparer (other than officer) is based on a		
	s	ign	Main M. Keinham	15//	6/2011
		ere	Signature of officer	Date	
			MARK REISBAUM TREASURER		
			Type or print name and file		
			Date Che	ck If Preparer	's identifying number
	Pald		Preparer's Self-	(see inst	ructions)
		arer's	11011	loyed ►	
	Use		f self-employed).	EIN	115 700 5555
			address, and ZIP + 4 101 MONTGOMERY STREET 22ND FL SAN FRANCISCO, CA 94104	Phone no -	415-788-6666
	May	the II	RS discuss this return with the preparer shown above? (see instructions)	. , , <u></u>	. X Yes No
	For	Priva	cy Act and Paperwork Reduction Act Notice, see the separate Instructions. +		Form 990 (2009)

9E1010 3 000 6247BC 630F

17 13

Form **990** (2009)

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		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Sections 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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	•		
	complete Schedule D, Part III	8		х
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		Х
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		х
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	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	•	***	
	Schedule D, Part VI		1	
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more	<u> </u>		X. 1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	- 35	1000	, 1
•	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.	1.4		2.3
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		1 3
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	•"		132
•	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		3 555	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	Į,	* s.	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	,	*. <u>*</u> . *.	* 1
	complete Schedule D, Parts XI, XII, and XIII	12		X
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No		1 20	. 1
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	* 22		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
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		Х
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		Х
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		Х
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		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Checklist of Required Schedules (continued)

11 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 71 If "yes," complete Schedule I, Parts I and III. 12 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 27 If "Yes," complete Schedule I, Parts I and III. 13 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organizations current and former officers, directors, trustees, key employees, and highest compensation of the organization have a lax-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 246 through 24d and complete Schedule K. If "No," go to question 25 12 Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? 12 Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? 13 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 is to the temporary period exception with a disqualified person during the year? If "Yes," complete Schedule L, Part I is to the organization was that it engaged in an excess benefit transaction with a disqualified person of unity the year? If "Yes," complete Schedule L, Part I is to the organization was 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 was extent at the engaged in an excess benefit transaction with a disqualified person outside person that the part I is the organization provide a grant or other assistance to an officer, director, trustee, key employe				Yes	No
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part K., octumn (A), line 2 if "Yes" complete Schedule I, Part I and III. 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 I, and 1 an	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			21		X
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organizations current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," are innex 24b through 24d and complete Schedule K. If "No,"go to question 25 b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year? b Is the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year? b Is the organization are that it engaged in an excess benefit transaction with a disqualified person line a prior year, and that the transaction has not been reported on any of the organizations" prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II. Was also not or by a current or former officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization to any officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person releted to such an individual? If "Yes," complete Schedule L, Part II. Was the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Sched	22	· · · · · · · · · · · · · · · · · · ·			
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 a 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 dupestion 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization anish an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization 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. 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-E27 If "Yes," complete Schedule L. Part I. 25 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 Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part II. 27 Year IV instructions for applicable fling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV. 28 Was the organization and one officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N. Part IV. 30 Did the organization sell, exchange, dispose of, or transfer more t			22		<u> </u>
employees? If "Yes," complete Schedule J 4 a 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 question 25 b Did the organization maintain an escrow account other than a refunding escrow at any time during the year? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. Was alona to or by a current of former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organizations tax year? If "Yes," complete Schedule L, Part II. Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III. Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part III. A current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. A chamily member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. Did the organi	23				
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with a disqualified person during the year? If "Yes," complete Schedule L, Part I			24u		
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-E27 If "Yes," complete Schedule L, Part II. 25 Was aloan to or by a current or former officer, director, trustee, key employee, bighly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II ID 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. 26 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): 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28 A a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 20 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 21 Did the organization injudate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M. 22 Activation of the secondary of the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I. 22 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. 28 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable relate	25 a		252		x
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. 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 . Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributior, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III . A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part I . Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part I . Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I . Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II . Schedule N. Part V, Ima 2 . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R. Part V, Ima 2 . Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that	h				
990-EZ? // "Yes," complete Schedule L, Part I . 28 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualfied person outstanding as of the end of the organization's tax year? // "Yes," complete Schedule L, Part II . 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? // "Yes," complete Schedule L, Part III . 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): 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . 28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . 28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 29 A current organization in the organization in the organization in the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I . 29 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . 20 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," compl	D				
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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. 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. b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 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. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part I. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I. 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II. 31 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 II. 32 Did the organization related organization and treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, Inie 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a	26				
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27 X X 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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
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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		If "Yes," complete Schedule L, Part III	27		X
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 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. 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, Part I . 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . 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 . 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Iine 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, Iine 2 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. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines					
Schedule L, Part IV. 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. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . 32 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 Use the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part S II, III, IV, and V, Iine 1 34 Was the organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 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, Iine 2 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, Iine 2 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 . 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.			28a		<u> </u>
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	b				
family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		·	28b		_ <u>X</u>
Part IV	С				
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			20.0		v
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 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. Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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. 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. 30 X X X X X X X X X X X X X	20				$\overline{}$
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. 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 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 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 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 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		· · · · · · · · · · · · · · · · · · ·	23	_	
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	50		30		х
Part I	31				
Schedule N, Part II	•		31		Х
Schedule N, Part II	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I		Schedule N, Part II	32		Х
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
III, IV, and V, line 1			33		X
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	34				
Schedule R, Part V, line 2			34	Х	
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	35				
organization? If "Yes," complete Schedule R, Part V, line 2			35		X
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	36	,,,,,			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			36		
Part VI	37				
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			27		v
19? Note. All Form 990 filers are required to complete Schedule O	39		3/		 ^-
	30		38	x	
		10: Note: All Form 300 files are required to complete doffedule O			(2009)

Par	Statements Regarding Other IRS Filings and Tax Compliance			<u> </u>
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of [
	U.S. Information Returns Enter -0- if not applicable	ļļ		
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	. 1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			ł
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0		-	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			'
	instructions)			1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		x
h	account)?			<u> </u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			1
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding		i	
	Prohibited Tax Shelter Transaction?	5c		L
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
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l,
а	and services provided to the payor?	7a	•	ĺ '
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		<u> </u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7.		
_	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		-
9	Sponsoring organizations maintaining donor advised funds.			<u> </u>
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
40 -	amounts due or received from them.)	12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	L	Щ
	1 100, Office and difficult of tax-exempt interest received of accided during the year [120]	<u> </u>		

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

Seci	ion A. Governing body and Management			
	ا ما		Yes	No
1a	Enter the number of voting members of the governing body 1a 4			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v
	any other officer, director, trustee, or key employee?	2		<u>X</u>
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		<u>X</u>
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_		Х
6	Does the organization have members or stockholders?	6		<u>X</u> _
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a_	Х	
b	Each committee with authority to act on behalf of the governing body?	8b_	Х	
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		Χ
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b				
	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	Х	
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	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Χ_	
С	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		Х
14	Does the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a				
	with a taxable entity during the year?	16a		x
ь	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		ļ	
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed	-		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only			
.0	available for public inspection. Indicate how you make these available. Check all that apply	,		
	Own website X Another's website X Upon request			
10				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
20	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 ► ANDREW FRADKIN 121 STEUART STREET SAN FRANCISCO, CA 94105-1236			
	415-777-0411			
	140 111 V341			

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

X Check this box if the organization did not compensate any current officer, director, or trustee (C) (A) (B) (E) (F) Position (check all that apply) Name and Title Average Reportable Reportable Estimated hours per Officer compensation compensation amount of Highest Individual trustee Key employee employee Institutional trustee from from related week director other organizations compensation the compensated organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related organizations JORDANNA POLIS SCHUTZ PRESIDENT/DIRECTOR 1.00 Х Х 0 0 0. BERNARD OSHER SECRETARY/DIRECTOR 1.00 Χ Х 0 0 0. PHYLLIS COOK DIRECTOR 1.00 Х 0 103,152 0. MARK REISBAUM TREAS/ASST SEC/DIRECTOR 1.00 Х Х 0 20,658. 187,333

9E1041 3 000

Name and title	Average						lv)	Reportable Re		ole		mated	1
Name and the	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Fornier	compensation from the organization (W-2/1099-MISC)	compensa from rela organizati (W-2/1099-N	ition ted ons	amo comp fro orga and	ount of orner ensation m the nization related	f on on d
	-												
											_		
	-												
	-												
	-												
	-												
	-												
										•			
	-												
1b Total							▶	0	290	,485.		20,	658.
Total number of individuals (including but not li reportable compensation from the organization	mited to tho	se list	ed a 0	bov	e) v	who re	cei	ved more than \$100),000 in				
												Yes	No
3 Did the organization list any former off employee on line 1a? If "Yes," complete Sche	icer, direct dule J for su	or or ich ind	tru divid	uste ual	e, 	key e	emp	oloyee, or highes	t compens	ated	3		X
4 For any individual listed on line 1a, is the organization and related organizations	ne sum of greater t	repoi	tabl	e (com 0?	ipensa If "Y	itior ∕es,	n and other com	pensation i	from such		-	_
ındıvidual											4	Х	<u> </u>
5 Did any person listed on line 1a received services rendered to the organization? If "Yes											5	,	X
Section B. Independent Contractors													
1 Complete this table for your five highest compensation from the organization	compensa	ted II	nder	enc	dent	t con	trac	ctors that receive	d more tha	an \$10	0,000	of 	
(A) Name and business ac	dress							(B) Description of se	rvices	((C) Compens		
							+						
							+						
							亅						
2 Total number of independent contractors more than \$100,000 in compensation from				nite	d t	o tho:	se	listed above) who	received				

Par	t VIII	Statement of Revenue		20-3895451		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1a	Federated campaigns 1a				
, gifts, grants llar amounts	b	Membership dues 1b				
ts, ç amo	С	Fundraising events 1c				
gıf lar	d	Related organizations 1d			1	
imis,	е	Government grants (contributions) 1e				
utic er s	f	All other contributions, gifts, grants,				
t te		and similar amounts not included above . 1f				
Contributions, and other simil	g	Noncash contributions included in lines 1a-1f \$				·
	h	Total. Add lines 1a-1f ▶ Business Code	0.			
Program Service Revenue		Business Code				
ě	2a				<u> </u>	
9	Ь				 	
Ž	С					
နို	d					
ran	•					
ē	f	All other program service revenue			<u> </u>	
	g	Total. Add lines 2a-2f	0		·	
	3	Investment income (including dividends, interest, and	40.000			40.030
		other similar amounts)	48,930.		 	48,930.
	4	Income from investment of tax-exempt bond proceeds	0		-	
	5	Royalties	<u> </u>			
						
	6a	Gross Rents				
	b	Less rental expenses				
	d d	Rental income or (loss)	0.	•	~ ~	
	l "	(i) Secunties (ii) Other	<u> </u>			
	7a	Gross amount from sales of				
		assets other than inventory				
	Ь	Less cost or other basis				
	_		_ ~			
	C d	Gain or (loss)				
a)	8a	Gross income from fundraising				
nue	, oa	events (not including \$				
		of contributions reported on line 1c)				
æ		See Part IV, line 18				
e		Less direct expenses b				
Other Reve	6	Net income or (loss) from fundraising events				
O		Gross income from gaming activities				
	""	See Part IV, line 19				
	Ь	Less direct expenses b				
	_ c	Net income or (loss) from gaming activities ▶	0			
	10a	Gross sales of inventory, less				
		returns and allowances a				
	ь	Less cost of goods sold b]			
		Net income or (loss) from sales of inventory ▶	0			
		Miscellaneous Revenue Business Code				
	11a					_
	ь					
	С					
	d	All other revenue			ļ	
	е	Total. Add lines 11a-11d	0			
	12	Total Revenue. See instructions		<u> </u>		48,930
			·			- 000

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 ame 7b, 8b, 9b, and 10b	ounts reported on lines 6b, of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other a	assistance to governments and				
organizations in th	ne U.S. See Part IV, line 21	0.			
2 Grants and other	assistance to individuals in	ļ			
the U.S. See Part I	V, line 22	0.			
3 Grants and other	assistance to governments,				
	nd individuals outside the				
U S See Part IV, I	nes 15 and 16	0.			
	for members	0.			
	f current officers, directors,				
•	employees	0.			
•	t included above, to disqualified				
•	d under section 4958(f)(1)) and			1	
• •	In section 4958(c)(3)(B)	0.			
•		0.			
	wages	- 0.			
•	nbutions (include section 401(k)	_]	
-) employer contributions)	0.			
• •	enefits				·
Payroll taxes		0.			
Fees for services	(non-employees)	,			
a Management .		0.			
b Legal		312.		312.	
c Accounting		2,500.		2,500.	
d Lobbying		0.			
e Professional fundrais	sing services See Part IV, line 17	0.			
	gement fees	0.			
	<u> </u>	0.			
	omotion	0.			
		0.			
	ology	0.			
		0.1			
		0.		-	
		0.			
		``			
•	el or entertainment expenses	0.			
= = = = = = = = = = = = = = = = = = =	state, or local public officials	0.			
	ventions, and meetings	0.			
	ites	0.			
•	etion, and amortization	0.			
	<u>-</u>	0.			
4 Other expenses	s Itemize expenses not	1			
	(Expenses grouped together				
	scellaneous may not exceed				
5% of total exper	nses shown on line 25 below)				
a ADMINISTRAT	IVE FEES	38,314.		38,314.	
b BANK/WIRE_T	RANSFER FEES	140.		140.	
c FILING FEES		30.		30.	
		27.		27.	
	s	-			
•	openses. Add lines 1 through 24f	41,323.	0.	41,323.	
	eck here If following			12,020.	
	plete this line only if the				
organization repo	rted in column (B) joint costs			1	
from a combined	d educational campaign and			1	
fundraising solicit	ation				Form 990 (200

20-3895451

Part	ìΧ	Balance Sheet	_		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	459.	1	1,106.
ļ	2	Savings and temporary cash investments	2,270,845.	2	1,531,153.
	3	Pledges and grants receivable, net		3	
İ	4	Accounts receivable, net	1,656.	4	6,314.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section	i		
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
ASS	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges		9	
1	10 a	Land, buildings, and equipment. cost or 10a			
		other basis Complete Part VI of Schedule D			
	b	Less. accumulated depreciation 10b		10c	
- -	11	Investments - publicly traded securities	1,424,908.	11	2,193,803.
- 1-	12	Investments - other securities. See Part IV, line 11	1,063,412.	12	1,158,309.
-	13	Investments - program-related See Part IV, line 11		13	
-	14	Intangible assets		14	
-	15	Other assets. See Part IV, line 11		15	
-	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,761,280.	16	4,890,685.
1	17	Accounts payable and accrued expenses	14,291.	17	38,394
-	18	Grants payable		18	
-	19	Deferred revenue		19	
:	20	Tax-exempt bond liabilities		20	
ဖွာ့ ဒ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
a Bi		employees, highest compensated employees, and disqualified			
		persons Complete Part II of Schedule L		22	
:	23	Secured mortgages and notes payable to unrelated third parties		23	
:	24	Unsecured notes and loans payable to unrelated third parties		24	
:	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	14,291.	26	38,394
		Organizations that follow SFAS 117, check here X and			
ces	^-	complete lines 27 through 29, and lines 33 and 34.	4,746,989.	,,	4,852,291
au	27	Unrestricted net assets	4,740,969.	27	4,052,291
Ba	28	Temporarily restricted net assets		28	-
힏	29	Permanently restricted net assets	· -	29	
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
: اکّ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se :	33	Total net assets or fund balances	4,746,989.	33	4,852,291.
	34	Total liabilities and net assets/fund balances	4,761,280.	34	4,890,685.

Form **990** (2009)

Page 11

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X 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		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	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	Х	
	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		i	ŀ
	issued on a consolidated basis, separate basis, or both:			
	Separate basis X 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
ь	The second secon			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3ь		
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service

Name of the organization PINION STREET FOUNDATION **Employer identification number** (F/K/A THE JORDANNA POLIS SCHUTZ) 20-3895451 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.) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) Я A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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. c Type III - Functionally integrated Type II Type III - Other e X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting f X Since August 17, 2006, has the organization accepted any gift or contribution from any of the 9 following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) Χ (ii) A family member of a person described in (i) above? 11g(il) Х (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Х Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vii) Amount of in col (i) listed in your organization (described on lines 1-9 the organization in organizátion in col support (i) organized in the above or IRC section governing document? col (I) of your (see instructions)) support? US2 Yes No Yes No Yes No ATTACHMENT

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

Schedule A (Form 990 or 990-EZ) 2009

0

Par	Support Schedule for Or (Complete only if you check				b)(1)(A)(iv) a	nd 170(b)(1)(/	4)(vi)
Sect	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		!		<u> </u>		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3				<u> </u>	 	
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)						
6	Public support. Subtract line 5 from line 4		<u></u>		<u> </u>	<u> </u>	
$\overline{}$	tion B. Total Support	(-) 200F	(h) 2006	(~) 2007	(4) 2000	(a) 2000	(O Total
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	_		<u> </u>		1	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
		_					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10			<u> </u>	<u> </u>		
12	Gross receipts from related activities, etc. (se	ee instructions)			<i></i> .	12	
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>					
Sect	tion C. Computation of Public Sup						
14	Public support percentage for 2009 (line		•				%
15	Public support percentage from 2008 S					15	<u> </u>
16a	33 1/3 % support test - 2009. If the o						
	this box and stop here. The organization						
b	33 1/3 % support test - 2008. If the c						
	check this box and stop here. The organization	-					
1/a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me					•	•
	Part IV how the organization meets			=	•		supported
	organization						, , , >
b	10%-facts-and-circumstances test -		_				
	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization supported organization						▶□
18	Private foundation. If the organization instructions				<u> </u>	<u></u>	▶ 🔲
						Schodule A (Form 9	00 000 EZ\ 2000

Part III	Support Schedule for Organizations Described in Section 509(a)(2)
	(Complete only if you checked the box on line 9 of Part I.)

1 Gri me an 2 Gri sol fur org 3 Gri un 4 Ta be its 5 Th fur org 6 To	indar year (or fiscal year beginning in) iffs grants, contributions, and embership fees received (Do not include by "unusual grants") iross receipts from admissions, merchandise old or services performed, or facilities instituted in any activity that is related to the ganization's tax-exempt purpose iross receipts from activities that are not an included trade or business under section 513 are revenues levied for the organization's enefit and either paid to or expended on is behalf the value of services or facilities irrnished by a governmental unit to the reganization without charge								
an a	embership fees received (Do not include by "unusual grants") ross receipts from admissions, merchandise old or services performed, or facilities mished in any activity that is related to the ganization's tax-exempt purpose ross receipts from activities that are not an irrelated trade or business under section 513 ax revenues levied for the organization's enefit and either paid to or expended on a behalf the value of services or facilities irrnished by a governmental unit to the ganization without charge								
and sold fur organization of the fur organization of t	ny "unusual grants") ross receipts from admissions, merchandise old or services performed, or facilities raished in any activity that is related to the ganization's tax-exempt purpose ross receipts from activities that are not an irrelated trade or business under section 513 ax revenues levied for the organization's enefit and either paid to or expended on is behalf the value of services or facilities irrnished by a governmental unit to the reganization without charge								
2 Grisol fur org 3 Gri un 4 Ta be its 5 Th fur org 6 To	ross receipts from admissions, merchandise old or services performed, or facilities inshed in any activity that is related to the ganization's tax-exempt purpose								
sol fur organization organizati	and or services performed, or facilities in the ganization's tax-exempt purpose coss receipts from activities that are not an arelated trade or business under section 513 cax revenues levied for the organization's enefit and either paid to or expended on a behalf companization by a governmental unit to the ganization without charge								
fur org 3 Gri un 4 Ta be its 5 Th fui org 6 To	rnished in any activity that is related to the ganization's tax-exempt purpose ross receipts from activities that are not an irelated trade or business under section 513 ex revenues levied for the organization's enefit and either paid to or expended on sebenalf he value of services or facilities irrnished by a governmental unit to the reganization without charge								
org 3 Gri un 4 Ta be its 5 Th fun org 6 To	ganization's tax-exempt purpose ross receipts from activities that are not an arelated trade or business under section 513 ax revenues levied for the organization's enefit and either paid to or expended on a behalf the value of services or facilities arrished by a governmental unit to the reganization without charge								
3 Grund 4 Tabee its 5 The full org 6 To	ross receipts from activities that are not an arelated trade or business under section 513 ax revenues levied for the organization's enefit and either paid to or expended on a behalf								
un 4 Ta be its 5 Th fun ore 6 To	arelated trade or business under section 513 ax revenues levied for the organization's enefit and either paid to or expended on sebenalf								_
4 Ta be its 5 Th fui org	ex revenues levied for the organization's cenefit and either paid to or expended on schalf								
be its 5 Th fui org 6 To	enefit and either paid to or expended on seemed by a governmental unit to the ganization without charge				1				
its 5 Th fui org 6 To	s behalf he value of services or facilities rnished by a governmental unit to the ganization without charge								
5 Th fur org 6 To	ne value of services or facilities rnished by a governmental unit to the ganization without charge								
fur org	rnished by a governmental unit to the ganization without charge		 	-					
or 6 To	ganization without charge								
6 To	· · · · · · · · · · · · · · · · · · ·								
			_						
7a Δr	otal. Add lines 1 through 5								
, w , ~,	mounts included on lines 1, 2, and 3								
	ceived from disqualified persons			<u> </u>					
b Ar	mounts included on lines 2 and 3 ceived from other than disqualified								
pe	ersons that exceed the greater of								
	5,000 or 1% of the amount on line 13 in the year								
	dd lines 7a and 7b								
	ublic support (Subtract line 7c from	•							
	ne 6)								
	on B. Total Support				•				_
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(е	2009	(f) To	tal
	mounts from line 6								
	ross income from interest, dividends,								_
	ayments received on secunties loans,								
	ents, royalties and income from similar		}						
	nrelated business taxable income (less								_
	,			1					
	ection 511 taxes) from businesses								
	cquired after June 30, 1975	·- ·-						 	
	dd lines 10a and 10b							<u> </u>	
	et income from unrelated business ctivities not included in line 10b,				İ				
	hether or not the business is regularly								
	arried on							<u> </u>	
2 0	ther income Do not include gain or								
lo	ss from the sale of capital assets							ļ	
(E	Explain in Part IV)								
3 To	otal support. (Add lines 9, 10c, 11,								
а	and 12)								
	irst five years. If the Form 990 is for	the organizatio	n's first, second	third, fourth, o	r fifth tax year a	s a s	ection 501	(c)(3)	_
or	rganization, check this box and stop here	<u> </u>			<u></u>			<u> ▶</u>	.
ectio	on C. Computation of Public Sup	port Percent	tage						
5 P	ublic support percentage for 2009 (line 8, c	olumn (f) divided	by line 13, column	(f))		15			
6 P	ublic support percentage from 2008 Schedi	ule A, Part III, line	15			16			
ectic	on D. Computation of Investmen	t Income Per	centage						_
_	nvestment income percentage for 2009 (III			3. column (f))		17			_
	envestment income percentage from 2008	•	•			18			_
	3 1/3 % support tests - 2009. If the o						33 1/2 9/	and line	_
								_	. [
	7 is not more than 33 1/3 %, check the		-	-	· · · · · · · · · · · · · · · · · · ·		_		١.
	3 1/3 % support tests - 2008. If the org								ſ
	ne 18 is not more than 331/3 %, check		•	•	•		-		-
O PO	rivate foundation. If the organization	aid not check	a box on line	14, 19a, or 19				ructions >	

2011000011111								' 49
Part IV	Supplemental Information. Complete Part II, line 17a or 17b; or Part III, line 12							ne 10;
	raitif, into the of the, or that in, into the	e. I lovide any or	nor additiona		ATTACI		AIOTIS	
SCHEDULE A	, PART I - INFORMATION ABOUT SUPPORTED ORGANI	ZATIONS						-
			(III) TYPE OF	(IV)	(V)	(VI)	(VII)	AMOUNT OF
(I) NAME O	F SUPPORTED ORGANIZATION	(II) EIN	ORGANIZATION	YES NO	YES NO	YES NO		SUPPORT
JEWISH COM	MUNITY FEDERATION OF SAN FRANCISCO	64-1156533	7	х	х	х		0
TOTAL AMOU	NT OF SUPPORT							0.

SCHEDULE D (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

PINION STREET FOUNDATION

Employer identification number

<u>(F/</u>	K/A THE JORDANNA POLIS SCHUTZ)			20-3895451
Par	Organizations Maintaining Donor Adv the organization answered "Yes" to For	rised Funds or Other m 990, Part IV, line 6.	Similar Funds or	r Accounts Complete if
		(a) Donor advise	ed funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor adv	usors in writing that the a	ssets held in donor	advised
_	funds are the organization's property, subject to the			Yes No
6	Did the organization inform all grantees, donors, and			
	used only for charitable purposes and not for the ber			
	purpose conferring impermissible private benefit?			
Par	Conservation Easements. Complete if	the organization answ	ered "Yes" to For	rm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the o			
	Preservation of land for public use (e.g., recrea	· '		an historically important land area
	Protection of natural habitat			a certified historic structure
	Preservation of open space	•		
2	Complete lines 2a through 2d if the organization held	d a qualified conservation	contribution in the	form of a conservation
	easement on the last day of the tax year			
	, ,			Held at the End of the Year
а	Total number of conservation easements		[2a
ь	Total acreage restricted by conservation easements		i i	2b
c	Number of conservation easements on a certified his			2c
d	Number of conservation easements included in (c) a		``[2d
3	Number of conservation easements modified, transfer	•	shed, or terminated	by the organization during
	the tax year ▶	•	•	
4	Number of states where property subject to conserva	ation easement is located	ı ▶	
5	Does the organization have a written policy regarding			
	violations, and enforcement of the conservation ease			Yes No
6	Staff and volunteer hours devoted to monitoring, insp	pecting, and enforcing co	nservation easeme	nts during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting	ng, and enforcing conser	vation easements d	uring the year
	▶ \$	_		
8	Does each conservation easement reported on line 2	2(d) above satisfy the red	quirements of sectio	n
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?			1 1 1
9	In Part XIV, describe how the organization reports co	onservation easements in	n its revenue and ex	pense statement, and
	balance sheet, and include, if applicable, the text of t	the footnote to the organ	ization's financial st	atements that describes
	the organization's accounting for conservation easer			
Pai	Organizations Maintaining Collections Complete if the organization answered	<mark>s of Art, Historical Tr</mark> "Yes" to Form 990, Pa	easures, or Othe art IV, line 8.	r Similar Assets.
1a	If the organization elected, as permitted under S	SEAS 116, not to repor	t in its revenue st	atement and balance sheet works or
ı cı	art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its fi	eld for public exhibition, nancial statements that	education, or rese describes these ite	earch in furtherance of public service ms
b	If the organization elected, as permitted under S historical treasures, or other similar assets held provide the following amounts relating to these item	for public exhibition, e		
	(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 a			
	following amounts required to be reported under S			<u> </u>
а	Revenues included in Form 990, Part VIII, line 1 .	•		▶ \$

Assets included in Form 990, Part X

Par	III Organizations Maintaini	ng Collec	tions o	of Art, His	storica	Treasure	es, or	Other Similar	Assets(continued)	
2	Using the organization's acquisition,	20000 0101	n and of	ther record	le chac	k any of the	folio	wing that are a su	anificant u	ise of its	
3	collection items (check all that apply		ii, aiiu oi	iner record	is, chec	k any or the	· IOIIO	wing that are a sig	grinicant u	ise or its	
_	Public exhibition	,		ا بہ		Loan or ov	chan	ao programe			
a				ď				ge programs			
þ	Scholarly research			e		Other					
C	Preservation for future gen		l4			£				·-	
4	Provide a description of the organiza	ation's coi	iections	ano expiai	n now ti	ney turtner	tne or	ganization's exer	npi purpo:	se in	
_	Part XIV.										
5	During the year, did the organization								_	—	¬
	assets to be sold to raise funds rath										No
Par	Escrow and Custodial A IV, line 9, or reported an	amount o	n Form	990, Par	the or	ganization e 21.	ans	wered "Yes" to		υ, Ραπ	
4-	Is the constitution on agent twisters	. auata dia	n or othe		diami far	aantribuitia		other ecosts not			
та	Is the organization an agent, trustee				-				٢		No
	included on Form 990, Part X?								[Yes	NO
D	If "Yes," explain the arrangement in	Рап XI V а	ina comp	piete the it	ollowing	table.			Amount		
	6						<u> </u>		Amount		
	Beginning balance									 	
	Additions during the year										
	Distributions during the year										
	Ending balance								T		- No.
	Did the organization include an amo		orm 990,	Part X, III	e 217	• • • • • •	• • •	• • • • • • • •	[Yes _	No
_	If "Yes," explain the arrangement in					V94		00 D- + 1) / 1	- 40		
Par	t V Endowment Funds. Con									1 43 =	
	D	(a) Currer	nt Year	(b) Prio	r year	(c) Two ye	ears ba	ck (d) Three ye	ears back	(e) Four year	rs back
1a	Beginning of year balance	_				<u> </u>					
	Contributions	-				ļ					
С	Net investment earnings, gains,										
	and losses										
	Grants or scholarships					ļ				<u> </u>	
е	Other expenditures for facilities .		}			1					ı
	and programs										
	Administrative expenses					ļ					
g	End of year balance									<u> </u>	
2	Provide the estimated percentage of		end bala	ance held	as:						
а	Board designated or quasi-endowm			%							
b	Permanent endowment	%									
		<u></u> %									
3a	Are there endowment funds not in the	he pos se	ssion of	the organi	zation th	nat are held	and a	administered for t	he		
	organization by:									Yes	No
	(i) unrelated organizations									3a(i)	\bot
	(ii) related organizations									3a(ii)	
b	If "Yes" to 3a(II), are the related orga			-						3b	
4	Describe in Part XIV the intended us										
Par	t VI Investments - Land, Bu	ildings, aı	nd Equ	<u>ipmentS</u>	ee For	<u>m 990, Pa</u>	<u>rt X,</u>	line 10.	,		
	Description of investment			or other basis estment)	s (I	b) Cost or other)	er	(c) Accumulated depreciation	(d) Book value	
1a	Land										
b	Buildings	[
С	Leasehold improvements	[
d	Equipment	[
е	Other	<u></u> [
Tota	I. Add lines 1a through 1e (Column	(d) must e	qual For	m 990, Pa	rt X, co	lumn (B), lir	10	(c).) >			
					· · · · · · · · · · · · · · · · · · ·	·	· ·				0 0000

Part VII	Investments - Other Securities. See	<u> Form 990, Part X, line 12</u>	2	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	n t value
Financial d	lerivatives			
Closely-he	Id equity interests	1,158,309.	ATTACHMENT 2	
		· 		
Jo				
-				
-				
				
		- 		
				
. .				-
otal (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	1,158,309.		
Part VIII	Investments - Program Related. See	Form 990, Part X, line 1:	3.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation	1
	(2) 2000.1910.1.0.1.1.001.1.0.1.1.1.1,p0	(5, 25512	Cost or end-of-year market	t value
		 		
		 		
		 		
		 		
		 		
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13.)	>		
Part IX	Other Assets. See Form 990, Part X,	line 15.		· · · · · · · · · · · · · · · · · · ·
		a) Description		(b) Book value
				()
		 		
				
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part			
1.	(a) Description of liability	(b) Amount		
	come taxes	1.7		
- Cuciai III	Some taxes			
		 		
	·			
-	(A) (A) (A) (A) (A) (A) (A) (A) (A) (A)			
		<u> </u>		
	Footnote. In Part XIV, provide the text of the fo		tinancial statements that reports the	•
organizatio	on's liability for uncertain tax positions under F	IN 48		

20-3895451 Schêdule D (Form 990) 2009 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI 1 Total revenue (Form 990, Part VIII, column (A), line 12) 2 Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 4 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 5 6 Prior period adjustments 7 7 Other (Describe in Part XIV.) 8 8 Total adjustments (net) Add lines 4 through 8 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XII Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments Donated services and use of facilities 2b Other (Describe in Part XIV.) d 2e 3 3 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 Other (Describe in Part XIV) Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 2a 2b c Other losses 2c d Other (Describe in Part XIV.) e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 3 Amounts included on Form 990, Part IX, line 25, but not on line a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIV) 4b c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 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 XIV Supplemental Information (continued)

SCHEDULE D, PART VII - INVESTMENTS - CLOSELY HELD EQUITY INTERESTS

DESCRIPTION

PRIVATE EQUITY SECURITIES

TOTALS

ATTACHMENT 2

COST
OR FMV

1,158,309.

FMV

SCHEDULE J (Form 990)

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

(F/K/A THE JORDANNA POLIS SCHUTZ)

Department of the Treasury

Internal Revenue Service

PINION STREET FOUNDATION

Employer identification number 20-3895451

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 Housing allowance or residence for personal use First-class or charter travel Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a is 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 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 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. Written employment contract Compensation committee Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? Х b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Х 4c c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 Х **b** Any related organization? Х 5b If "Yes" to line 5a or 5b, describe in Part III 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 6a a The organization? Х **b** Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed Х 7 payments not described in lines 5 and 6? If "Yes," describe in Part III 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 Х If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2009

Х

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 VIII, line 1a

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:::		(a) Dieakuowii	2 4 - Z 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior
(A) Name		(i) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			Form 990-EZ
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Page 3

SCHEDULE O (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

PINION STREET FOUNDATION

(F/K/A THE JORDANNA POLIS SCHUTZ)

20-3895451

Employer identification number

ATTACHMENT 3

SUPPLEMENTAL INFORMATION

FORM 990, PART VI, SECTION B, LINE 11:

THE FORM 990 IS PREPARED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM BASED ON AUDITED FINANCIAL STATEMENTS AND WITH THE ASSISTANCE OF THE ORGANIZATION'S FINANCE AND ACCOUNTING STAFF. THE FINAL DRAFT OF THE 990 IS REVIEWED BY THE TREASURER. THE PRESIDENT AND/OR OTHER OFFICERS RECEIVE THE FINAL VERSION OF THE FORM PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY. FOR TRUSTEES AND

OFFICERS CONFLICT OF INTEREST POLICY, THE SUPPORTED ORGANIZATION REQUESTS

COMPLETION OF AN ANNUAL DISCLOSURE FORM BY JANUARY 31 FOR ALL TRUSTEES

AND OFFICERS. THE SUPPORTED ORGANIZATION ENSURES THAT ALL FORMS HAVE BEEN

RECEIVED AND PREPARES A SUMMARY OF DISCLOSURES AND FORWARDS THE FORMS AND

SUMMARY TO ITS LEGAL COUNSEL. FOLLOWING LEGAL COUNSEL'S REVIEW, THE

SUPPORTED ORGANIZATION PRESENTS THE DISCLOSURES TO ITS BOARD'S ENDOWMENT

COMMITTEE WHICH REVIEWS THE DISCLOSURES. THE SUPPORTED ORGANIZATION'S CFO

ALSO RECEIVES A COPY OF THE SUMMARY AND REVIEWS ALL FORMS AND IS

RESPONSIBLE FOR ASSURING APPROPRIATE REPORTING TO THE EXTERNAL AUDITORS

AND DISCLOSURE IN THE ANNUAL TAX FILINGS.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION DOES NOT HAVE EMPLOYEES AND DOES NOT COMPENSATE OFFICERS

zation PINION STREET FOUNDATION

(F/K/A THE JORDANNA POLIS SCHUTZ)

Employer identification number 20-3895451

ATTACHMENT 3 (CONT'D)

AND MEMBERS OF THE BOARD. HOWEVER, CERTAIN OFFICERS ARE COMPENSATED BY A RELATED PARTY, THE JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO, THE PENINSULA, MARIN AND SONOMA COUNTIES ("JCF"). JCF DOES A COMPENSATION SURVEY AND ANALYSIS FOR THE SENIOR LEVEL POSITIONS. JCF LOOKS AT COMPENSATION THAT IS EQUITABLE INTERNALLY AND EXTERNALLY FOR THESE POSITIONS. THE EXECUTIVE COMMITTEE OFFICERS APPROVE THE COMPENSATION FOR THE CEO. THERE IS A PERIODIC REVIEW OF ALL SALARIES FROM AN INDEPENDENT PROFESSIONAL COMPENSATION ORGANIZATION. THE REVIEW INCLUDES SIMILAR POSITIONS IN THE NON-PROFIT AND FOR-PROFIT SECTOR LOCALLY AND IS ADJUSTED NATIONALLY. THE COMPENSATION REVIEW ALSO ANALYZES COMPENSATION INFORMATION FROM OTHER FORM 990S FOR SIMILAR ORGANIZATIONS AS WELL AS MANY OTHER SOURCES OF COMPENSATION DATA.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS CONSOLIDATED AUDITED FINANCIAL STATEMENTS AND FORM 990 FOR THE MOST RECENT THREE YEARS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990 PART IV, LINE 12 & PART XI, LINE 2A:

THE ORGANIZATION RESPONDED "NO" TO THIS QUESTION BECAUSE THE FORM 990 IS FILED FOR THE ORGANIZATION ON A STAND-ALONE BASIS, WHILE THE AUDITED FINANCIALS ARE PREPARED ON A CONSOLIDATED BASIS WITH THE RESULTS OF ITS SUPPORTED ORGANIZATION. THE FINANCIAL STATEMENTS OF THE ORGANIZATION ARE CONSOLIDATED WITH THOSE OF ITS SUPPORTED ORGANIZATION, AND AUDITED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM IN ACCORDANCE WITH GAAP. THE SUPPORTED

Schedule O (Form 990) 2009 Page 2

Name of the organization PINION STREET FOUNDATION (F/K/A THE JORDANNA POLIS SCHUTZ)

Employer Identification number 20-3895451

ATTACHMENT 3 (CONT'D)

ORGANIZATION'S AUDIT COMMITTEE HAS RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE CONSOLIDATED FINANCIAL STATEMENTS.

FORM 990, SCHEDULE R, PART II, COLUMN (B):

BUILD, MAINTAIN, AND STRENGTHEN JEWISH IDENTITY, COMMUNITY AND LIFE.

DUE TO TAX SOFTWARE LIMITATIONS, CERTAIN QUESTIONS THAT SHOULD HAVE BEEN ANSWERED N/A WERE EITHER LEFT BLANK OR ANSWERED NO AS FOLLOWS:

- 1) PART IV, QUESTION 5, 24B, 24C, 24D
- 2) PART V, QUESTION 1C, 3B, 5C, 6B, 7G, 7H, 8, 9A, 9B
- 3) PART VI, QUESTION 10B, 16B
- 4) PART XI, QUESTION 3B
- 5) SCHEDULE J, QUESTION 1B, 2, 9

ATTACHMENT 4

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE FOUNDATION OPERATES EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL, OR RELIGIOUS PURPOSES BY CONDUCTING OR SUPPORTING ACTIVITIES FOR THE BENEFIT OF, OR TO CARRY OUT THE PURPOSES OF, THE JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO, THE PENINSULA, MARIN AND SONOMA COUNTIES.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

20 00	
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Inspection
Employer dentification number Open to Public

20-3895451

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

PINION STREET FOUNDATION

(F/K/A THE JORDANNA POLIS SCHUTZ)

Partl

Name of the organization Department of the Treasury Internal Revenue Service

(e) End-of-vear accate (d) Total inco (c) l ecel domicile (state (a)

	Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	i otal income	End-of-year assets	Direct controlling entity
1						
Part II	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it	he organization ansv	wered "Yes" on Fo	orm 990, Part IV	', line 34 because) It

Part II	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ations (Complete if the constant during the tax year.)	he organization ans ar.)	wered "Yes" on F	orm 990, Part IV	, line 34 because	=
	(a)		(p)	(0)	(g)	(e)	€
	Name, address, and EIN of related organization		Primary activity	Legal domicile (state	-egal domicile (state Exempt Code section Public charity status	Public charity status	Direct controlling
				or foreign country)		(if section 501(c)(3))	entity
JEWISH	JEWISH COMMUNITY FEDERATION OF SF	94-1156533					

(a)	<u>e</u>	(<u>O</u>	<u> </u>	(e)	E
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section Public charity status (if section 501(c)(3))	Public charity status (if section 501(c)(3))	Direct controlling entity
JEWISH COMMUNITY FEDERATION OF SF 94-1156533					
121 STEUART STREET SAN FRANCISCO, CA 94105	SEE STATEMENT CA	CA	501 (C) (3)	7	N/A

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

Schedule R (Form 990) 2009

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Page 2

Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Schedule R (Form 990) 2009

Part III

Yes No (j) General or managing partner? (h) Percentage ownership Schedule R (Form 990) 2009 (I)
Code V-JBI
amount in box 20 of
Schedule K-1
(Form 1055) (g) Share of end-of-year assets Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) (h) Disproportionate allocations? Yes No (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d) Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from
sections
512-514) (c)
Legal domicite
(state or
foreign country) Direct controlling (b) Pnmary activity (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization Part IV

20-3895451

Page 3

Schedule R (Form 990) 2009

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes No
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?	arts II–IV?	> 2
E		10 ×
b Giff, grant, or capital contribution to otner organization(s)		
d Lone or loan distrates to or for other organization(s)		X PI
		-1 ×
		×
f Sale of assets to other organization(s)		
g Purchase of assets from other organization(s)		×
h Exchange of assets		
i Lease of facilities, equipment, or other assets to other organization(s)		
i lease of familyment or other assets from other organization(s)		1j X
k Performance of services or membership or fundraising solicitations for other organization(s)		1k ×
		_
m Sharing of facilities, equipment, mailing lists, or other assets		_
n Sharing of paid employees		11 ×

Reimbursement paid to other organization for expenses		_
p reminusement paid by oned by gamzanon to expenses		1 370
q Other transfer of cash or property to other organization(s)		1
r Other transfer of cash or property from other organization(s)		11 X
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	onships and transaction t	nresnoids (c)
(a) Name of other organization	Transaction type (a–r)	Amount involved
(1) JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO	1	38,314.
(2) JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO	Σ	0.
(3) JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO	z	0.
(4) JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO	0	7,261.
(5)		
(9)		
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Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entry	(b) Primary activity	9 5	Are all partners section	.	(f) Disproportionate altocations?	(g) Code V-UBI amount in box 20	(h) General or managing
		country)	organizations?	assets	Yes No		Yes
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