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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public Inspection

	A F	or the	2 2009 calendar year, or tax year beginning $JUL~1$, 2009 and ending	JUN 30, 2010	
	BC	heck if	Please C Name of organization	D Employer identifi	
		Addre	use ins ss label or		
	一	_ chang Name chang	type	94-2	533608
		initial return	See Number and street (or P O box if mail is not delivered to street address) Room/st		
		Termi	Specific 5105 N. EL DORADO STREET	(209) 951-8834
	느	Amena return Applic	City or town, state or country, and ZIP + 4	G Gross receipts \$	141,462.
	L	_tion pendii	Discrisity on 33207	H(a) Is this a group re	
			F Name and address of principal officer: James Morris same as C above	for affiliates? H(b) Are all affiliates ind	Yes X No
	ΙT	ax-ex	empt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		list. (see instructions)
			te: ► N/A	H(c) Group exemption	
					M State of legal domicile CA
2010	Pa	rt I	Summary	D. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
જ	ě	1	Briefly describe the organization's mission or most significant activities: THE FOUN SUPPORTS THE RELIGIOUS, EDUCATIONAL AND CULT		
7	тап	2	Check this box If the organization discontinued its operations or disposed of m		
NOV	& Governance		Number of voting members of the governing body (Part VI, line 1a)	3	8
ž	ğ		Number of independent voting members of the governing body (Part VI, line 1b)	4	8
G	<u>e</u> s	5	Total number of employees (Part V, line 2a)	5	0
Š	Activities		Total number of volunteers (estimate if necessary)	6	0
A V	\rightarrow \big		Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
SCANNED	\dashv	D	Net unrelated business taxable income from Form 990-T, line 34	Prior Year	Current Year
43	۰	8	Contributions and grants (Part VIII, line 1h)	Thor real	416.
	2	9	Program service revenue (Part Vill, line 2g)		
	Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-5,206.	21,112.
	_		Other revenue (Part-VIII, Column A) lines 5 6d, 8c, 9c, 10c, and 11e)	F 006	01 500
	\dashv	12	Total revenue - addrines 8-through 11 (must equal Part VIII, column (A), line 12)	-5,206.	21,528.
		13 14	Grants and similar amounts paid(Part IX Solumn (A), lines 1-3) Benefits paid(to onto members (Part IX, column (A), line 4)	44,701.	36,000.
	S.		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)		33/3334
	Sus	16a	Professional fundraising fees (Rart IX) column (A), line 11e)		
	Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	··········	
	_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,528.	4,729.
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	47,229. -52,435.	40,729.
	58		Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year	End of Year
•	aset and and and and and and and and and and	20	Total assets (Part X, line 16)	1,132,822.	1,134,999.
	Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		
:		22	Net assets or fund balances. Subtract line 21 from line 20	1,132,822.	1,134,999.
į	Pa	rt II	Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statement	the and to the best of my knowled	ge and belief it is this correct
			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge	go and bonor, it is trac, correct,
;	Sign	1		1 1018	9/10
1	Here	Ð	Signature of office	Date	*
			James Morris, President		
			Type or print name and title	Check if Prepar	er's identifying number
	Pald		Préparer's Stinature Date 19- 2010	self- employed ▶ (see in	structions)
		arer's	Firm's name (or O.B. KLEINFELD & CO.	EIN ►	
	Use (omy	self-employed), 949 N. CENTER STREET, SUITE A		
			ZIP+4 STOCKTON, CA 95202-1327	Phone no ► 2	
	May	the If	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

See Schedule O for Organization Mission Statement Continuation

	1990 (2009) TEMPLE ISRAEL FOUNDATION FUND 94-2533608 Page	<u>-</u>
Pai 1	RIFERRITE Statement of Program Service Accomplishments Briefly describe the organization's mission: None	_
		_ _
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No. 1f "Yes," describe these changes on Schedule O.	,
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:)(Expenses \$ 36,000. including grants of \$)(Revenue \$ THE FOUNDATION FUND FINANCIALLY SUPPORTS THE RELIGIOUS, EDUCATIONAL AND	<u> </u>
	CULTURAL GOALS OF TEMPLE ISRAEL BY HELPING TO FUND PROGRAMMING. PROGRAMS INCLUDE	_
	FINANCIAL SUPPORT TO THE RELIGIOUS SCHOOL, ADULT EDUCATION AND RELATED PROGRAMS.	<u> </u>
	FROGRAMO.	_
		_ _
		_
		_
		_
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		_
		_
		_
		_
		_
		_
		_ _
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	_
		_
		_
		_
		_
		_
		_
		_
		_
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ►\$ 36,000.	_

932002 02-04-10

Part IV Checklist of Required Schedules

			Yes	No			
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?						
	If "Yes," complete Schedule A	1	X				
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for						
	public office? If "Yes," complete Schedule C, Part I	3		X			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X			
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	!					
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_					
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to						
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,						
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete						
	Schedule D, Part III	8		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		X			
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?						
	If "Yes," complete Schedule D, Part V	10		Х			
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X						
	as applicable	11	X				
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,						
	Part VI.						
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total						
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII						
•	275 the displaced in the control of the total						
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.						
•	 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in 						
_	Part X, line 16? If "Yes," complete Schedule D, Part IX.						
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X						
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses						
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.						
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v			
400	Schedule D, Parts XI, XII, and XIII.	12		X			
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No						
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			V			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X			
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X			
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			v			
45	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X			
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	45		v			
16	or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>			
10	located outside the United States? If "Yes," complete Schedule F, Part III	46		X			
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16					
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			- 11			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X			
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"						
	complete Schedule G, Part III	19		X			
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X			
	The state of the s						

TEMPLE ISRAEL FOUNDATION FUND Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		<u>X</u> _
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	Instructions for applicable filing thresholds, conditions, and exceptions):			
а	· · · · · · · · · · · · · · · · · · ·	28a	•	х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	200		 -
_	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		ļ	_
•	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30	 	
٠.	If "Yes," complete Schedule N. Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-3:		
-	Schedule N, Part II	32	•	х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
-	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?	33		
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	24		х
35		34		
JJ	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Ves " complete Schedule R. Part V. Inc. 2.	25		Х
20	If "Yes," complete Schedule R, Part V, line 2 Section 501(a)(3) organizations. Did the organization make any transfers to an example an electrical organization.	35		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
2-	If "Yes," complete Schedule R, Part V, line 2	36_		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O.	<u>38</u>	X	
		Form	990 (2009)

	,	·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a (
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (7		
	Did the organization comply with backup withholding rules for reportable payments to vendors and i	eportable gaming	1		
	(gambling) winnings to prize winners?		1c		Ì
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a (
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
	Financial Accounts.				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X_
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Region 1.	arding Prohibited			
_	Tax Shelter Transaction?		5c	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization solicit			
	any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or gifts			
7	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).			1	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for provided to the payor?	goods and services			X
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required	7b		
Ŭ	to file Form 8282?	as required	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7.00		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a		1		
	benefit contract?		7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	7f		
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required	7	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	ganizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	ess business holdings			
	at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4		
11	Section 501(c)(12) organizations. Enter:	1 1			
a	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
10-	amounts due or received from them.)	11b	1		1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form		12a	ļ	ļ
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		990	(2000)
			LOUID	33U i	ZUUSI

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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.

Sec	tion A. Governing Body and Management					
4.	Faharaha ayarkan afyadan ayaraha a afaha ayaran kada	ـما	ı	8	Yes	No
1a	Enter the number of voting members of the governing body	1a		8		
b	Enter the number of voting members that are independent	1b	<u> </u>			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			Х
3	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the	e aire	ct supervision			Х
	of officers, directors or trustees, or key employees to a management company or other person?	00	0	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		U was filed?	4	-	X
5	Did the organization become aware during the year of a material diversion of the organization's asser	ts7		5		X
6	Does the organization have members or stockholders?		*	6		Λ_
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the	_		v
	governing body?	_		7a		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			
	by the following:					
_	The governing body?			8a	X	
ь	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the			.,
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	L	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)			
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, 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 f	iling th	e form?	11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					.,
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld giv	e rise			
	to conflicts?			12b		
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		 <u></u>
13	Does the organization have a written whistleblower policy?			13	<u> </u>	Х
14	Does the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approve	al by ı	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ı				
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		Χ
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate	ts participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	ion's			
	exempt status with respect to such arrangements?			16b		
<u>Sec</u>	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶CA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Γ (501	(c)(3)s only) avaı	lable for		
	public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	of interest polic	cy, and fina	incial	
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the orga	anization: 🕨	-	
	HENRY EBSTEIN - (209) 951-8834					
	5105 N. EL DORADO STREET, STOCKTON, CA 95207-5849)				
				Form	990	(2009)

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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 (A)	(B))			(D)	(E)	(F)	
Name and Title	Average			Pos	rtion			Reportable	Reportable	Estimated	
	hours	(cl	neck	all t	that	арр	ly)	compensation	compensation	amount of	
	per week	Individual trustee or director	institutional trustæ	Officer	Key employee	Highest compensated employee	Готе	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
JAMES MORRIS											
PRESIDENT	4.00	X		Х				0.	0.	0.	
SHERRY WENDGRAD	4 00	.,		, ,				_	_		
SECRETARY HENRY EBSTEIN	4.00	X		X				0.	0.	0.	
TREASURER	5.00	X		x				0.	0.	0.	
		 			-						
		<u> </u>									
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		-				_	_				
		1	ı	ı	l	1	l				

Par	VII Section A. Officers, Directors, Tru	stees, Key E	nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
	` (A)	(B)	(C)						(D)	(E)		(F)	
•	Name and title	Average			Pos				Reportable	Reportable		ted	
		hours per	_	neci	all	II that apply)			compensation	compensation from related		amoun	
		week	Individual trustee or director				L		the	organizations	l c	ompens	
			ŏ	器			Safed		organization	(W-2/1099-MISC)		from t	he
			瓦	Institutional trust ac		製	Highest compensated employee		(W-2/1099-MISC)			organiza and rela	
			M dus	tg tg	Officer	Key employee	plest	Former			- 1	rganiza	
			를	먈	₹	ā	₹.	Ğ					
				<u> </u>									
			-	 -			-	-			-		
			 	 -	-								
				<u> </u>								·	
											_		
	·												
					-		-				+		
						-		-			-		
			İ				1						
					l								
1b	Total						▶		0.	C	•		0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bov	e) wl	no r	eceived more than \$100	,000 in reportable			_
	compensation from the organization					-						1	0
•	Bully and the second										ļ	Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			, ke	y en	olqr	yee,	or r	nighest compensated er	nployee on	١.		X
4	For any individual listed on line 1a, is the su			nmn	enes	ation	n and	d of	her compensation from	the organization		· · · · · · · · · · · · · · · · · · ·	^_
•	and related organizations greater than \$150									ine organization		.	x
5	Did any person listed on line 1a receive or a									ices rendered to			
	the organization? If "Yes," complete Sched											<u> </u>	<u> x</u>
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of compe	nsatio	n from	
	the organization. NONE												
	(A) Name and business	address							(B) Description of s	ervices	Com	(C) pensati	on
									2000/15/10/10/	0,7,000		ponoan	-
								\neg					_
]					
								_					
								_					
								İ					
	Total number of independent contractors (i	ncluding but a	ot li	mito	d to	the	ee li	etec	t above) who recoved ~	ore than			
_	\$100,000 in compensation from the organization		JC 11		J 10		0	31 5 (above, who received it	ore man			
										<u> </u>	Fo	rm 990	(2009)

					FOUNDAT	ION FUND		94-2533	608 Page 9
Pa	rt V	Ш	Statement of Rever	nue					· ·
	L		, , , , , , , , , , , , , , , , , , , ,			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1	a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts		b	Membership dues	1b					
	-	С	Fundraising events	. 1c					
<u>e</u> 9	-	d	Related organizations	1d					
S.E			Government grants (contribut						
흕		f	All other contributions, gifts, gran	ts, and					
声制			similar amounts not included abo	ve [1f]	416.				
E B		9	Noncash contributions included in lines	1a-1f \$					
0 6		h	Total. Add lines 1a-1f		•	416.			·
. 1					Business Code				
<u>ğ</u>	2	а							
E 5		b							
e S		C	 						
83		d							
Program Service Revenue		0			-				
_		T	All other program service reve	enue	•			:	
\dashv		9	Total. Add lines 2a-2f	مادين مام مام	-				
	3		Investment income (including other similar amounts)	dividends, inte	est, and	36,054.			36,054.
	4		Income from investment of ta	v-evemnt hand		30,031.			30,034.
	5		Royalties	A-exempt bond	proceeds				
	3		noyanies	(ı) Real	(iı) Personal				·· ································
	6	2	Gross Rents	(i) Heal	(ii) Fersonai				
	-	_	Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)	L	•		1	•	
			Gross amount from sales of	(ı) Securities	(II) Other				
ľ	•	_	assets other than inventory	104992					
		b	Less cost or other basis						
ŀ			and sales expenses	119934					
		c	Gain or (loss)	-14942	•				
			Net gain or (loss)		•	-14,942.	-14,942.	·	
Other Revenue			Gross income from fundraisin including \$	g events (not of		·	·		
Š			contributions reported on line						
Ř.			Part IV, line 18	. , , , , , , , , , , , , , , , , , , ,	,				
울		b	Less: direct expenses		,				
°			Net income or (loss) from fund	draising events					
			Gross income from gaming ad						
			Part IV, line 19	(
ļ		b	Less: direct expenses	ı					
		С	Net income or (loss) from gan	ning activities					
	10	а	Gross sales of inventory, less	returns					
ł			and allowances	ŧ	a				
		b	Less: cost of goods sold	ı					
ļ		c	Net income or (loss) from sale	s of inventory					
ļ			Miscellaneous Revenu	ıe	Business Code				
	11	a							
		b							
ļ		С							_
}		d	All other revenue		<u></u>				
ŀ		е	Total. Add lines 11a-11d			21 522	14 040		26 054
93200	12 9		Total revenue. See instructions		<u> </u>	21,528.	-14,942.	0.	36,054.
93200 02-04	-10								Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	. All other organizations must compl				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members	36,000.	36,000.	***************************************	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		-		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				·
10	Payroll taxes	· , , <u>-</u> ·			~~
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	1,095.		1,095.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,050.		1,050.	·-··
g	Other	1,0300		1,030.	
12	Advertising and promotion		,		
13	Office expenses				···
14	Information technology				· · · · · · · · · · · · · · · · · · ·
15	Royalties	-			·
	Occupancy				
16	· · · · · ·		·- ···· ·		
17	Travel			***	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	1:1			
19	Conferences, conventions, and meetings	<u></u>			_
20	Interest			<u>-</u> -	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below)	2 504		2 5 5 4	
а	INSURANCE	2,584.		2,584.	
b					
C					,
đ					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	40,729.	36,000.	4,729.	0.
26	Joint costs. Check here				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

932010 02-04-10

Pa	rt X	Balance Sheet				
	•	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		22,004.	1	16,589.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, dir				
		employees, and highest compensated employee	s. Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as				
		4958(f)(1)) and persons described in section 495				
		Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
\ss	8	Inventories for sale or use			8	
•	9	Prepaid expenses and deferred charges	7/117	9		
	10a	Land, buildings, and equipment. cost or other				
		basis. Complete Part VI of Schedule D	10a			
		Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	63,373.	11	54,227.	
	12	Investments - other securities. See Part IV, line 1	1,039,856.	12	1,056,594.	
	13	Investments - program-related. See Part IV, line 1		13		
	14	Intangible assets		7.500	14	7 500
	15	Other assets. See Part IV, line 11		7,589.	15	7,589.
	16	Total assets. Add lines 1 through 15 (must equa	il line 34)	1,132,822.	16	1,134,999.
	17 18	Accounts payable and accrued expenses		17		
	19	Grants payable Deferred revenue		18		
	20	Tax-exempt bond liabilities			19	
(A	21	Escrow or custodiał account liability. Complete P	Inst IV of Cohodulo D		20	
Liabilities	22	Payables to current and former officers, directors			21	
Ē		highest compensated employees, and disqualifie	• • •			
Ë		of Schedule L	d persons. Complete Fart II		22	
	23	Secured mortgages and notes payable to unrelate	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	-		24	
	25	Other liabilities. Complete Part X of Schedule D			25	 -
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
		Organizations that follow SFAS 117, check he	re Dand complete			······································
S	İ	lines 27 through 29, and lines 33 and 34.	·			
Š	27	Unrestricted net assets			27	
3ak	28	Temporarily restricted net assets			28	
Ē	29	Permanently restricted net assets			29	
Ē		Organizations that do not follow SFAS 117, ch	eck here 🕨 🗓 and			
6		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equ	ulpment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc	ome, or other funds	1,132,822.	32	1,134,999.
2	33	Total net assets or fund balances		1,132,822.	33	1,134,999.
	34	Total liabilities and net assets/fund balances		1,132,822.	34	1,134,999.

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

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Inspection

Employer identification number

	·/ ///			ISRAEL FOUND						94	-2533608	
Pa	rtl	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See ins	tructions.			
lhe	organi	zation is not	a private foundation	because it is. (For lines	through	11, check	only one b	ox)				
1		A church, co	onvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)				
2		A school des	scribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E.)	i						
3		A hospital or	a cooperative hosp	tal service organization (described	ın section	170(b)(1)	(A)(iii).				
4			A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
		city, and state:										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		section 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
			(b)(1)(A)(vi). (Comple		• •		•			•		
8		A community	y trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)						
9				elves: (1) more than 33			rom contri	butions, n	nembershi	ip fees, an	d aross receipts f	rom
				nctions - subject to certa								
				axable income (less sect							_	
			509(a)(2). (Complete			,			,			
10		An organizat	ion organized and o	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	I).			
11	X	An organizat	ion organized and o	perated exclusively for th	ne benefit	of, to perfo	orm the fu	nctions of,	or to carr	y out the	ourposes of one o	r
				ations described in secti							•	
				organization and compl								
		a X Type	l b □	☐ Type II 💢	з 🔲 Тур	e III - Fund	tionally in	tegrated		d 🔲	Type III - Other	
e		By checking	this box, I certify the	at the organization is not	controlled	d directly o	r indirectly	by one o	r more dis	qualified p	ersons other than	1
		foundation n	nanagers and other t	han one or more publicly	y supporte	ed organiza	tions des	cribed in s	ection 50	9(a)(1) or s	ection 509(a)(2).	
f				ten determination from t								
		supporting o	organization, check ti	nis box								
9		Since Augus	t 17, 2006, has the o	organization accepted ar	ny gift or c	ontribution	from any	of the following	owing per	sons?		
		(i) A perso	on who directly or inc	lirectly controls, either al	one or tog	ether with	persons o	described	ın (II) and ((III) below,	Yes	No
		the gov	erning body of the s	upported organization?							11g(i)	X
		(ii) A family	member of a perso	n described in (i) above?	1						11g(ii)	X
(iii) A 35% controlled entity of a person described in (i) or (ii) above?				e?	11g(iii) X					X		
h		Provide the f	following information	about the supported or	ganızatıon	(s).						
				(iii) Type of								
(I)	Name	of supported	(II) EIN	(Iv) Is the organization (v) Did you notify the				(vi) is organizati	s the	(vii) Amount of		
organization		nızatıon	organization (described on lines 1-9			in col (I) listed in your organization in col governing document? (I) of your support?			(I) organiz	zed in the l	support	
				above or IRC section					'' US	57		
				(see Instructions))	Yes	No	Yes	No	Yes	No		
	MPL:		04 1504050	1								
LS.	RAE	<u>L</u>	94-1524258	1	X		X		X		36,00	<u> </u>
						-		-		1		
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				-	 							
						 		ļ	ļ	 		
r											26.04	١.٨
ota ⊔∧		riuseu A -A -	ad Panemuset: Darte	ction Act Notice, see th	<u> </u>	tions for	L	ţ.	<u> </u>	1 A 15	36,00	
пΑ	COL P	LIVACY ACT AL	w Panerwork Kefii	CHOR ACT NOTICE SEE !!	DE INCTILLA	TIONS TOP			SCROOLI	O A ILATO	. wun ar 000 E71	211110

932021 02-08-10

Form 990 or 990-EZ.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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 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 Section B. Total Support Calendar year (or fiscal year beginning in)▶ (a) 2005 **(b)** 2006 (c) 2007(d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 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 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

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

Scn Ps	edule A (Form 990 or 990-EZ) 2009 ert III Support Schedule for (Organizations	Described in	Section 500/a	1/2) (Camplete and		Page 3
Se	ction A. Public Support	JI BUILLEUROIIS	Dosonbed III	Oection oosta	//=/ (Complete only	tit Aon cuecked tue or	ox on line 9 of Part I
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 2000	(5) 2300	(0) 2007	(4) 2000	(8) 2009	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-			1			
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to	ļ					
	the organization without charge				•		
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)			· · · · · · · · · · · · · · · · · · ·			
	ction B. Total Support				•		
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b		<u> </u>				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other Income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		-				
13	Total support (Add lines 9, 10c, 11, and 12)						
14	, , ,	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						<u>▶</u>
Sec	ction C. Computation of Publ					, ,	
15			•	olumn (f))		15	%
16						16	%
Sec	ction D. Computation of Inves						
17	Investment income percentage for 20	nvestment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))					
18							%
19a	19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not						
more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization							
b	b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and						
_	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
20	Private foundation. If the organizatio	n did not check a l	box on line 14, 19	a, or 19b, check th	us box and see in	structions	▶

Schedule A (Form 990 or 990-EZ) 2009

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

D	TEMPLE ISRAEL FUUNI		94-2533608					
Pa			is or Accounts. Complete if the					
	organization answered "Yes" to Form 990, Part IV, line							
		(a) Donor advised 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 advisors in v	vriting that the assets held in donor adv	ised funds					
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No					
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be	e used only					
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring							
	impermissible private benefit?	, , ,	Yes No					
Pa		anization answered "Yes" to Form 990.						
1	Purpose(s) of conservation easements held by the organization							
_	Preservation of land for public use (e.g., recreation or p		istorically important land area					
	Protection of natural habitat	· —	rtified historic structure					
	Preservation of open space	Freservation of a ce	Timed Historic structure					
2	• •							
~	Complete lines 2a through 2d if the organization held a qualification of the towards	ed conservation contribution in the form	n of a conservation easement on the last					
	day of the tax year.							
	-		Held at the End of the Tax Year					
a	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
	Number of conservation easements on a certified historic stru	, ,	2c					
d	Number of conservation easements included in (c) acquired a		2d					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	ne organization during the tax					
	year ▶							
4	Number of states where property subject to conservation eas	sement is located						
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	<u></u>					
	violations, and enforcement of the conservation easements it holds?							
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year ▶					
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements durin	g the year ▶ \$					
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 17	O(h)(4)(B)(i)					
	and section 170(h)(4)(B)(ii)?		Yes No					
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	se statement, and balance sheet, and					
	include, if applicable, the text of the footnote to the organizat							
	conservation easements.		· ·					
Pa	★ III Organizations Maintaining Collections of	Art, Historical Treasures, or (Other Similar Assets.					
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.						
1a	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and	balance sheet works of art, historical					
	treasures, or other similar assets held for public exhibition, ed							
	the footnote to its financial statements that describes these if	-	delice delivines, provides, in real view, the text of					
h	If the organization elected, as permitted under SFAS 116, to i		ance sheet works of art, historical transuiron					
-								
	or other similar assets held for public exhibition, education, or	research in furtherance of public service	ce, provide the following amounts relating to					
	these items:		N 4					
	(i) Revenues included in Form 990, Part VIII, line 1	•	► \$ ► \$					
_	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, historical trea		ial gain, provide					
	the following amounts required to be reported under SFAS 11	6 relating to these items:						
а	Revenues included in Form 990, Part VIII, line 1		▶ \$					
b	Assets included in Form 990, Part X		► \$ ► \$					

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. Se	ee Form 990, Part X, line 12.			
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year mar	
Financial derivatives				
Closely-held equity interests				
Other				
CHARLES SCHWAB & CO.			<u> </u>	
ADVANTAGE FUND	55,628.	Cost		
DODGE & COX FUND	125,361.	Cost		
FRANKLIN UTILITIES FUND	78,276.	Cost		<u> </u>
VANGUARD WELLINGTON FUND	156,786.	Cost		
VANGUARD ENERGY FUND	47,934.	Cost		
STATE OF ISRAEL (12-01-10)	50,000.	Cost		
PAS PORTFOLIO	542,609.	Cost		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	1,056,594.			
Part VIII Investments - Program Related. S	ee Form 990, Part X, line 13			
(a) Description of investment type	(b) Book value		(c) Method of valua Cost or end-of-year mar	
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)			v	
Part IX Other Assets. See Form 990, Part X, line	15	•		
	Description			(b) Book value
		-	· · · ·	
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		-		
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15.)		•	
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1. (a) Description of liability		(b) Amount		
Federal income taxes				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25.)			
2 FIN 48 Footnote In Part XIV provide the text of the foo	tnote to the organization's f	inancial eteter	monto that raparta the are	animation la linkilità i fav

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

932053 02-01-10

SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internet Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990.

2009
Open to Public Inspection

94-2533608
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