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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)

2009

OMB No 1545-0047

Open to Public Inspection

		ne Treasury Service		The organization may		opy of this return	•		porting red	quirements		Inspection
			endar yea	ar, or tax year beginnin	ng	9/1/2009		, and e	ending	8/31	1/2010	•
B c	heck if ap	plicable	Please	C Name of organization	Hand in H	land Americar	Friends	of the (Center fo	D Employer	identificat	tion number
Па	ddress o	change	use IRS label or	Doing Business As						93-1269590		
=	lame cha		print or	Number and street (or	PO box if mail is	not delivered to s	reet address	3) R	com/suite	E Telephone		<u></u>
=	nitial retu	=	type. See	PO Box 80102				´		(503) 892-29		
=	eminate		Specific	City or town, state or o	country and 7IP +					(505) 652-26		
Ħ			Instruc- tions.	Portland	oundy, and an	OR	a	7280	1	G Gross rece	ints \$	848,920
==	mended	on pending		ame and address of prir	noinal officer:	<u> </u>		7200	1 4 4 4 4 4			
∟ ^	ppiicauc	on penuing		•	•					his a group retui		F F
				rdon PO Box 80102, i	Portland, OR 9	97280				all affiliates inc		Yes No
I Ta	ax-exen	mpt status	: X 50	01(c) (3) ◄ (inse	ert no)	4947(a)(1) or	527		If "i	No," attach a list	t (see inst	tructions)
JW	/ebsite:	: ▶ ww	w handin	hand12 org					H(c) Gro	oup exemption n	umber 🕨	•
K Fo	om of o	rganization	X Co	prporation Trust	Association	Other ▶		L Ye	ar of format	tion 1999	M Stat	te of legal domicile OR
	art l		mmary	·		<u></u>		<u> </u>		.,,,,		
	1			the organization's mis	sion or most s	ionificant activ	ities H	IH wor	rks to bui	ld nartnershi	n & coe	xistence between
	'			itizens of Israel through								
8				,000 students HIH is								
ă				ether to form friendsh								
Activities & Governance												
Ğ	2			▶ if the organiza				oosea	or more t	nan 25% or	1 - 1	
මේ ග	3		_	g members of the gov	• • •			465			3	4
Ħ	4		•	endent voting member	_	ming body (Pa	art VI, line	10)			4	4
疲	5			employees (Part V, lii		•			•	•	5	3
ĕ	6			volunteers (estimate					•		6	28
	7a	•		lated business reveni			line 12 .			•	7a	0
	b	Net unre	elated bu	isiness taxable incom	e from Form 9	90-T, line 34.		•	 		7b	0
	Q				44.5					Prior Year	- 400	Current Year
•	Contributions and grants (Part VIII, line 1h)								5,489	848,877		
Ž	39	-		revenue (Part VIII, lir			·	•			047	0
Revenue	F 0			me (Part VIII, column				-			217	43
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)										0 0 0 0 0 0
	12						ne 12)	<u> </u>	-		5,706	848,920
	3 3			ar amounts paid (Par						63	1,500	673,330
	14			or for membe rs (Part				·				0
ø	₫5	Salanes	s, other co	ompensation, employ	ee benefits (P	art X, column	(A), lines	5–10)	<u> </u>		9,670	184,138
Expenses	.46a	Profess	ional fund	draising fees (Part IX	, column (A), li	neltie)		· · · · ·			3,344	13,692
Ž,	b			g expenses ∯art IX, c				179,49	1			
- e	7	Other ex	xpenses	(Part IX, column (A),	lines 11a-11d	, 11 <u>62</u> 4f).		•			7,269	130,765
	18	Total ex	penses.	Add lines 13-17 (mu	st.egual-Part	Ç⊂column (A),	line 25) .	•			3,783	1,001,925
	19	Revenu	<u>e less ex</u>	Add lines 13 17 (mu openses. Subtract line	18 from line	2	•				1,077	-153,005
Net Assets or Fund Balances									Beginn	ing of Current		End of Year
set alar	20		•	rt X, line 16)						268	8,408	115,160
a A	21			Part X, line 26)	<i></i>						820	577
				nd balances. Subtract	t line 21 from li	ne 20 .	•	-		26	7,588	114,583
Pa	rt II		nature									
				s of perjury, I declare that I true, correct, and complete								
				1 2 and complete	Decial adorr of pre	sparer (outer utair	omoci, is sa	JCG 011 G		λ Λ		ary ratewiouge
			Lee	ı /\						1 40	7/ 1	5 2011
Sig	n		Signature	of officer	= 11		,			Date	1 1	
Hei	re			ee Guidon-	Executiv	re 1) for	2/6-				47 (\)	15 2011
				rint name and title			Ч		-			
		Pres	parer's	15 4		Da	ate		Check if		Preparer	's identifying number
Paid	d		ature	May ()	1111/			1	self-	- (V)	(see instru	
	u parer's	s		[40.00]	WW-00 C		4/9/201	1 1	employed	►X	P01318	3306
	Only	rum	's name (or	· K Naulivii Du	onaldson					EIN ►		
	y	of self-employed), address, and ZIP + 4 1924 SE 35th Ave, Portland, OR 97214					· = -	Phone no	(503) 2	33-6078		
Max	/ the IE			turn with the prepare								. X Yes No
<u> </u>						 		• •	·			Form 990 (2009)
HTA)	•	y Act and	raperwo	ork Reduction Act Notice	ьө, эвв иле sepi	araw magucdo	113.					r Gilli 530 (2009)

	990 (2009) Hand in Hand American Friends of the Center for Jewish-Arab Education	93-1269590	Page 2						
	Statement of Program Service Accomplishments	<u></u>							
1	Briefly describe the organization's mission: To'raise awareness of and support for conflict resolution and integrated education in Israel.								
	10 laise awareness of and support for confinct resolution and integrated education in Islaes.								
2	Did the organization undertake any significant program services during the year which were not listed	on							
	the prior Form 990 or 990-EZ?	Yes	X No						
	If "Yes," describe these new services on Schedule O.								
3	Did the organization cease conducting, or make significant changes in how it conducts, any program								
	services?	· · · L Yes	X No						
	If "Yes," describe these changes on Schedule O.								
4	Describe the exempt purpose achievements for each of the organization's three largest program servi		1						
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the	amount of grants a	ana						
	allocations to others, the total expenses, and revenue, if any, for each program service reported.								
	/Code: \/Cymeness & 672 220 including grants of \$ 672 220 \/ (Poyer		0)						
4a	(Code:) (Expenses \$ 673,330 including grants of \$ 673,330) (Revented to the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish-Arab Education in Israel supported new programs in early childhood of the Center for Jewish and the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in early childhood of the Center for Israel supported new programs in the Center for Israel supported								
	development, community outreach initiatives, teacher training and curriculum development. In particu								
	in Beersheba Israel helped that school grow and add a toddler program. Support for the Jerusalem sc								
	communications and film-making program. Two academic conferences were organized dealing with h								
	in education. In addition, numerous foriegn dignitaries visited Hand in Hand schools including ambas		9						
	European diplomats, elected officials and others. Two youth delegations from Hand in Hand schools		ew						
	educational website for Hand in Hand was created. Numerous articles appeared in the Israeli press a								
	schools. Grants to the Center in Israel made a clear impact for strengthening bonds between Arab an								
	parents and the wider community. These grants helped solidify the model of integrated and bilingual		i society.						
4b			<u></u> 0)						
	Hand in Hand organized a second youth exchange with the USA. A delegation of 21 students from Ha								
	school came to Portland, OR in March 2010 for a two week visit hosted by students at Metropolitan Learning Center, a Portland								
	public school. Two Hand in Hand students came to the Los Angeles area in March 2010 to present their school in meetings at								
	churches, synagogues, local high schools and public events. Co-founder Lee Gordon and NY represe		es gave						
	over 30 lectures and presentations about the program to educators, community leaders and donors the		••••						
	Events were held in New York, Los Angeles, San Francisco, Portland, OR, Chicago, Florida, Baltimor Greensboro, NC, and elsewhere. Numerous articles appeared in the US press about the Hand in Han		٠						
	Greensboro, NC, and elsewhere. Numerous articles appeared in the OS press about the Harid in Hari	<u>u su iouis.</u>							
	•••••••••••••••••••••••••••••••••••••••	•••••							
4c	(Code:) (Expenses \$ 0 including grants of \$ 0) (Rever	nue \$	<u>0</u>)						
4.4	Other green agains (Describe in Schodule O.)								
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)							
	TEMPORADO W O / (1/04/01/04/04/04/04/04/04/04/04/04/04/04/04/04/								

761,207

4e Total program service expenses ▶

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
	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
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		Х
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		
	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
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u> </u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	•		
	complete Schedule D, Part III	8		х
	·	-0-		
	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_	\vdash	X
	Did the organization, directly or through a related organization, hold assets in term, permanent, or	_ ا		v
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	۱.,	,	
	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.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			L
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No			
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	L	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			l
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	1		[
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	L	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		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		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		Х
20	Did the organization operate one or more hospitals? If "Yes " complete Schedule H	20		X

Part IV **Checklist of Required Schedules** (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 Х 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 23 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 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . NA24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . \mathcal{N} ! \mathcal{A} 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a Х 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 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 Х 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 contributor, or a grant selection committee member, or to a person related to such an individual? 27 Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 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 Х 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b 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, 28c 29 29 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 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N, 31 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
٠.	U.S. Information Returns. Enter -0- if not applicable			. ;
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
С	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10_	^]
Ła	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			}
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	F-		
C -		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
b	If "Voc " did the organization include with every solicitation an express statement that such contributions or	Ua		
U	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	İ		
_	and services provided to the payor?	7a	~	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
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?	<u>7e</u>	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? N/A	7g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
	required?	/11	<u> </u>	
8	omanizations. Did the supporting organization, or a dopor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponeoring organizations maintaining donor advised funds			
a	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:			
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 . ル A 10b			
11	Section 501(c)(12) organizations. Enter:			l
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
			<u> </u>	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? NIA	12a		<u> </u>
b_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . N/A 12b			

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

-	Norma. Coverning Body and management		V	No
4-	Estantha sumbar of voting mambars of the governing body		Yes	NO
1a h	Enter the number of voting members of the governing body			
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1
2	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		<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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		_ 	
а	The governing body?	8a	X	
b		8b		<u> </u>
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		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code.)		Yes	No
100	Does the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, $\frac{1}{100}$	IVa		 ^
	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	100		
••	form?	11	x	İ
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are efficiently directors or trustees, and key employees required to disclose approach unforcests that could also			
	rise to conflicts?	12b		<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Alexander in Schedule O how this is done			
	describe in conclude o now and is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	450		-,
a	The organization's CEO, Executive Director, or top management official	15a 15b		X
b	Other officers or key employees of the organization	190	ļ	 ^
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
, va	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			<u> </u>
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		1
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	/)	*-	. **
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest	:		
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► Lee Gordon (503) 892-29	62		·····
	PO Box 80102, Portland, OR 97280			

Form	aan	/2000	۱

Hand in Hand American Friends of the Center for Jewish-Arab Education

93-1269590

Page 7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compe	ensate any curre	ent of	fice	r, d	irec	ctor, o	r trı	ustee.		
(A)	(B)	(B) (C)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director		Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Stuart Brown Chair & Board member	3.	X		х				0	0	0
Paula Blumenfeld Board member	1.	х						. 0	0	0
Julie Bram Board member	1.	X						0	0	0
Warren Eisenberg Board member	1.	х						0	0	0
Lee Gordon Executive Director	45.			x				75,000	0	1,253
Patricia Smith Secretary	35.			х				38,000	0	634
									·	
										_

			res	NO		
3	employee on line 1a? If "Yes," complete Schedule J for such individual					
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			l		
	individual	4		X		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5				
Se	ction B. Independent Contractors					
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization.	of				
	(A) (B) Name and business address Description of services	Comp	(C) ensation			
				0		
				0		
				0		
				0		
				0		
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0					
		F	orm 99	0 (2009)		

Form 99	0 (2009	Hand in Hand American Friends of the Center for Jewis		93-1269590 Page 9					
Part	VIII	Statement of Revenue							
		•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
क्ष क	1a	Federated campaigns 1a	4,294						
E in	b	Membership dues	0						
ë,E	С	Fundraising events 1c	0						
Contributions, gifts, grants and other similar amounts	d	Related organizations 1d	0						
8,E	е	Government grants (contributions) 1e	0						
ol is		All other contributions, gifts, grants, and				,			
E E		similar amounts not included above 1f	844,583						
15 D	а	Noncash contributions included in lines 1a-1f: \$	0			;			
a C	h	Total. Add lines 1a–1f	▶	848,877					
			lusiness Code						
Program Service Revenue	2a			0					
8	b			0					
85	c			0					
2	d			0					
E	e			0	-				
E G	f	All other program service revenue		0					
P	q	Total. Add lines 2a–2f		0					
	3	Investment income (including dividends, interest, and							
	,	other similar amounts)		43			43		
	4	Income from investment of tax-exempt bond proceeds		0					
	5	Royalties		o					
		(i) Real	(II) Personal						
	6a	Gross Rents	() . 6.66.1.2.						
		Less. rental expenses							
		Rental income or (loss) 0	0						
	d	Net rental income or (loss)		0					
	_	Gross amount from sales of (i) Securities	(II) Other				1		
	74	assets other than inventory 0	() Gallar						
	h	Less: cost or other basis							
		and sales expenses	o						
	c	Gain or (loss)	0						
	d	Net gain or (loss)	D	0					
		Gross income from fundraising							
ne	-	events (not including \$ 0	}				!		
Ę,		of contributions reported on line 1c).	1				İ		
Other Revenue		See Part IV, line 18 a	o						
er l	ь	Less: direct expenses b	o						
Ě	С	Net income or (loss) from fundraising events .	▶	ol					
U	9a	Gross income from gaming activities.							
		See Part IV, line 19	ol						
	b	Less: direct expenses b	0						
	С	Net income or (loss) from gaming activities		0					
	10a	Gross sales of inventory, less							
		returns and allowances a	o						
	ь	Less: cost of goods sold b	0				,		
		Net income or (loss) from sales of inventory	▶	Ö			·		
			Susiness Code				I		
	11a			o					
	Ь			0					
	C			0					
	d	All other revenue		0					
	е	Total. Add lines 11a–11d		0					
	12	Total revenue. See instructions	▶	848,920	0	0	43		

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 complete column (A) but are not required to complete columns (B), (C), and (D). (B) (A) Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S See Part IV, line 21. 0 Grants and other assistance to individuals in the U.S. See Part IV, line 22 n 3 Grants and other assistance to governments. organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 673,330 673,330 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 114,887 30,030 15,213 69,644 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 54,602 7,311 740 46,551 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 435 19 27 389 10 14.214 1,848 2.558 9,808 11 Fees for services (non-employees) 0 0 b 8,150 8,150 Accounting C 0 13.692 13,692 Professional fundraising services. See Part IV, line 17 Investment management fees 0 f 3.188 206 1,886 1,096 g 12 0 21,964 2,113 7,838 12,013 13 18,127 10,876 14 Information technology 3,626 3,625 15 16 5,519 718 3,808 993 3,345 17 20,908 1,673 15,890 Payments of travel or entertainment expenses for any federal, state, or local public officials 2.883 19 Conferences, conventions, and meetings 1.686 1,197 20 Interest 106 106 21 0 22 1.603 208 289 1,106 Depreciation, depletion, and amortization . . . 23 2.424 127 1,625 672 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.) 45,893 45,893 International Youth Exchange 0 b 0 0 0 e 0 All other expenses Total functional expenses. Add lines 1 through 24f 1,001,925 761,207 179,491 61,227 25 Joint costs. Check here ► X if following 26 SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . 21,315 11,082 5,512 4 721

Р	art X	Balance Sheet	······································		
			(A) Beginning of year		(B) End of year
	1	·Cash—non-interest-bearing	8,362	1	
•	2	Savings and temporary cash investments	49,443	2	28,718
	3	Pledges and grants receivable, net	204,000	3	80,600
	4	Accounts receivable, net	0	4	0
	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			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete]	
		Part II of Schedule L		6	
\$	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use		8	
ĕ	9	Prepaid expenses and deferred charges	2,384	9	3,226
	10a	Land, buildings, and equipment: cost or 10a 14,739			
		other basis. Complete Part VI of Schedule D	ł	- 1	
	ь	Less: accumulated depreciation 10b 12,123	4,219	10c	2,616
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	268,408		115,160
	17	Accounts payable and accrued expenses	820	17	577
	18	Grants payable		18	-
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
ğ		employees, highest compensated employees, and disqualified			
Ë		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities. Complete Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	820	26	577
		Organizations that follow SFAS 117, check here ▶ X and			
68		complete lines 27 through 29, and lines 33 and 34.		- 1	1
Ē	27	Unrestricted net assets	63,588	27	33,983
ala	28	Temporarily restricted net assets	204,000		80,600
8	29	Permanently restricted net assets	204,000	29	00,000
Š	23	· · · · · · · · · · · · · · · · · · ·		25	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
\$	30	Capital stock or trust principal, or current funds		30	
88	31	Paid-in or capital surplus, or land, building, or equipment fund	-	31	
₹	32	Retained earnings, endowment, accumulated income, or other funds .		32	
2	33	Total net assets or fund balances	267,588		114,583
	34	Total liabilities and net assets/fund balances	268,408		115,160
		Total namines and net assets/fully palatices	200,400	<u> </u>	110,100

Form **990** (2009)

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.

Form **990** (2009)

Х

3a

3b

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.

OMB No 1545-0047 Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

				Center for Jewish-Ara					Ļ	•	<u> 269590</u>		
_	rt l			narity Status (All or						nstructio	ns		
	orgar		•	ation because it is: (Fo		_		•	•				
1	닐			rches, or association of			ea in se c	שייני חסם	D)(T)(A)(I).			
2	닏			on 170(b)(1)(A)(ii). (At		•							
3	\sqcup	•	•	nospital service organi									
4	Ш		search organiza me, city, and sta	ation operated in conju ate:	ınction wi	th a hospi	ital descri	bed in se	ction 170	(b)(1)(A)	(iii). Ent	er the	
5		•	•	r the benefit of a collect (Complete Part II.)	ge or univ	ersity own	ned or ope	erated by	a govern	mental ui	nit descr	ibed	
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit d	lescribed	in sectio i	170(b)(1	1)(A)(v).				
7	X												
8			-	in section 170(b)(1)	-	omplete l	Part II.)						
9		An organizat receipts from support from	tion that normall n activities relate n gross investme	ly receives: (1) more the dot its exempt function to the its exempt function the income and unrelated after June 30, 1975.	nan 33 1/3 ons—subj ted busin	3 % of its ject to cer ess taxab	support fr tain exce le income	ptions, an (less sec	d (2) no ration 511	nore thar	33 1/3	% of its	
10		An organizat	tion organized a	nd operated exclusive	lv to test	for public	safety. So	ee sectio	n 509(a)(4).			
11	Ħ	•	•	nd operated exclusive	•	•	-			•	rv out th	ie	
	ш	purposes of	one or more pul	blicly supported organ at describes the type of	izations d	lescribed	in section	509(a)(1)) or section	on 509(a)	(2). See		on
		a Type	1 b 🗌	Type II c	Турє	e III-Fund	tionally ir	ntegrated		d 🔲 1	Type III-	-Other	
e		persons othe 509(a)(1) or	er than foundation section 509(a)(2	•	er than on	e or more	publicly s	supported	organiza	tions des	cribed in		on
f		_	, check this box	a written determinatior					ii, or Typ	e iii subt	orung		
g		•	t 17, 2006, has	the organization acce					of the			• • •	L.
				or indirectly controls,	either alo	ne or toge	ether with	persons o	described	in (ii)		Yes	No
				verning body of the su							11g(i)		
		(ii) A fami	ly member of a	person described in (i	above?						11g(ii)		
		(iii) A 35%	controlled entit	y of a person describe	ed in (i) or	(ii) above	?				11g(iii)		
h		Provide the f	following informa	ation about the suppor							1		
(i	•	of supported anization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section	in col (i) li	organization sted in your document?	the organ	rou notify nization in of your	organizat (i) organi	is the tion in cot zed in the	1 .) Amount support	ot
				(see instructions))	Yes	No	Yes	oort?	Yes	S? No	1		
											<u> </u>		0
													_
													0
								_					0
						-							0
—— Гota			<u> </u>							 	 		<u> </u>
····	41		I	I	1	1	•	1	ı	ı	1		U

Hand in Hand American Friends of the Center for Jewish-Arab Education 93-1269590 Schedule A (Form 990 or 990-EZ) 2009 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 Gifts, grants, contributions, and membership fees received. (Do not 1,434,358 870,358 977,982 715,489 848,877 4,847,064 include any "unusual grants.") Tax revenues levied for the organization's 2 benefit and either paid to or expended on its behalf 0 The value of services or facilities 3 furnished by a governmental unit to the 0 organization without charge 715,489 Total, Add lines 1 through 3 1,434,358 870,358 977,982 848,877 4.847.064 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 196,991 amount shown on line 11, column (f) . . . 4,650,073 6 Public support. Subtract line 5 from line 4. Section B. Total Support (d) 2008 (a) 2005 **(b)** 2006 (c) 2007 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 870,358 977.982 715.489 848.877 4,847,064 1,434,358 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 1,815 217 12.967 7.625 3,267 43 9 Net income from unrelated business activities, whether or not the business is 0 regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets 0 (Explain in Part IV.) 4,860,031 11 Total support. Add lines 7 through 10. 12 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) 13

Sec	tion C. Computation of Public Support Percentage		
14	Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	95.68%
	Public support percentage from 2008 Schedule A, Part II, line 14	15	86.16%

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

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

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. . >

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.

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

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

0	(Complete only if you checked the	he box on line	9 of Part I.)				
	tion·A. Public Support endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
•		(a) 2000	(b) 2000	(0) 2007	(a) 2000	(0) 2000	(i) rotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	ın any activity that is related to the				:		_
3	organization's tax-exempt purpose						0
3	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						_
	benefit and either paid to or expended on						_
_	its behalf						0
5	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						0
	received from disqualified persons					-	0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
C	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						_
800	tion B. Total Support		_			l	0
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6	0	0	`		0	0
9 10a	Gross income from interest, dividends,	0					
	payments received on securities loans,						
	rents, royalties and income from similar						•
b	sources						0
U	section 511 taxes) from businesses		,				
	acquired after June 30, 1975						0
	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is regularly						
	camed on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV)						0
13	Total support. (Add lines 9, 10c, 11,					-	
	and 12.)	o	0		0	0	0
14	First five years. If the Form 990 is for the orga		second, third,	fourth, or fifth t	ax year as a se	ection 501(c)(3)	
<u> </u>	organization, check this box and stop here.		• •		• • •	· · · · ·	
<u> 3ec</u> 15	tion C. Computation of Public Support Public support percentage for 2009 (line 8, co		by line 13, col	lumn (fl)		15	0 00%
16	Public support percentage from 2008 Schedul					16	0.00%
	tion D. Computation of Investment Incomp	ome Percent	age				
17	Investment income percentage for 2009 (line	10c, column (f)	divided by line	13, column (f))		17	0.00%
18	Investment income percentage from 2008 Sch				45 in mass the	18 m 23 4/20/ and	0.00%
19a	33 1/3% support tests-2009. If the organizat not more than 33 1/3%, check this box and sto						
b	33 1/3% support tests-2008. If the organization did						•
~	line 18 is not more than 33 1/3%, check this box and						. ▶
20	Private foundation. If the organization did no	t check a box o	n line 14, 19a,	or 19b, check	this box and se	e instructions .	. ▶ 🗌

	990 or 990-EZ) 2009	Hand in Hand A	merican Friends	of the Center for	Jewish-Arab Educat	ion 93-1269590	Page 4
Part IV	Supplemental	Information. Co	omplete this pa	rt to provide the	explanations requi	ired by Part II, line 1	0;
	'Part II, line 17a	or 17b; and Par	t III, line 12. Pro	ovide any other a	additional informati	ion. See instructions	<u>. </u>
•	•						
						• • • • • • • • • • • • • • • • • • • •	
				• • • • • • • • • • • • • • • • • • • •			
						• • • • • • • • • • • • • • • • • • • •	
						• • • • • • • • • • • • • • • • • • • •	
				••••			

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.

Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury internal Revenue Service

► Attach to Form 990. See separate instructions.

Employer identification number Name of the organization Hand in Hand American Friends of the Center for Jewish-Arab Education 93-1269590 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . . . No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other Yes No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . 2a Total acreage restricted by conservation easements . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c 2d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1.(ii) Assets included in Form 990, Part X. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

Part	U Organizations Maintaining	Collections of	Art, His	torical	reasures, o	r Oth	er Similar As	sets (C	<u>วทถเทน</u>	ea)_
3	Using the organization's acquisition, a	accession, and o	ther reco	rds, chec	k any of the f	ollowir	ng that are a s	gnificant	,	
•	use of its collection items (check all the	hat apply):	_		-					
а	Public exhibition		d 📙	Loan	or exchange p	orogra	ms			
b	Scholarly research		е 🗌	Other						
C	Preservation for future generat	ions								
4	Provide a description of the organizate Part XIV.	tion's collections	and expla	ain how t	hey further the	e orga	nizatıon's exe	mpt purp	ose in	
5	During the year, did the organization assets to be sold to raise funds rathe							ır Ye	es 🗀	No
Part										
	IV, line 9, or reported an am									
	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	er interm	ediary for	contributions	or oth		Ye	es 🗌	No
b	If "Yes," explain the arrangement in F	art XIV and com	plete the	tollowing	table:		1	Amount		
_	Beginning balance					. 1c		Amount		
c d	Additions during the year									
e	Distributions during the year									
f	Ending balance					1f	1			0
2a	Did the organization include an amou								es X	No
	If "Yes," explain the arrangement in F		rait A, ii	IIC ZI: .				□''	, a [7]	110
Part			ization a	nswere	d "Yes" to Fo	orm 99	90. Part IV. li	ne 10.		
· art	2.140	(a) Current year	(b) Pro		(c) Two years b		(d) Three years ba		ur years	back
1a	Beginning of year balance	7.5		<u> </u>						
b	Contributions						-			
C	Net investment earnings, gains,								-	
	and losses				_					
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance	0		0	<u> </u>					
2	Provide the estimated percentage of	•	ance held	l as:						
а	Board designated or quasi-endowme	ent 🕨	%							
b	Permanent endowment	<u></u> %								
C		<u>%</u>								
3a	Are there endowment funds not in the	e possession of t	he organ	ization th	at are held ar	nd adn	ninistered for t	he	1	
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organ							3b		
4	Describe in Part XIV the intended use					V I:-	- 10			
Part										
	Description of investment	(a) Cost or ot (investm	ent)	basis	st or other s (other)		ocumulated preciation	(d) Bo	ok value	
1a	Land		0		0	_				0
b	Buildings		0		0		0			0
С	Leasehold improvements		0		0		0			0
đ	Equipment		0		14,739		12,123			<u>2,616</u>
<u>e</u>	Other		000.5		0) (uma (D) (inc	10/-1	, 0			0
Total	. Add lines 1a through 1e. (Column (d) must equal For	m 990, P	ап X, со	umn (B), line	1U(C).)			<u> 2,616</u>

Schedule D (Form 990) 2009

Financial derivatives	(a) Description of security (including name of se	or category	, See Form 990, Part X, (b) Book value	(c) Method of valu	
Closely-held equity interests					
Other		<u></u>			
O O O O O O O O O O					
O O O O O O O O O O			0		
Column (b) must equal Form 990, Part X, col (B) line 12)			0		
Column (b) must equal Form 990, Part X, cot (B) line 12)					
Column (a) must equal Form 990, Part X, col (b) line 12)				†	
Column (b) must equal Form 990, Part X, col (B) line 12)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			 	 	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)					
Total. (Column (b) must equal Form 990, Part X, col (B) fine 13) (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value (c) Method of valuation Cost or end-of-year market value (c) Method of valuation Cost or end-of-year market value (c) Method of valuation Cost or end-of-year market value (c) Method of valuation Cost or end-of-year market value (d) Cost or end-of-year market value (e) Book value (f) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (f) Method of valuation Cost or end-of-year market value (o) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (f) Method of valuation Cost or end-of-year market value (g) Method of valu					
Part VIII Investments—Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value Cost or end-of-year market value 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Total (Column (h) must equal Form 990 Pan	Y col (8) line 12.)			·
(a) Description of investment type (b) Book value Cost or end-of-year market value 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
O O O O O O O O O O				(c) Method of valu	
0 0 0 0 0 0 0 0 0 0			0		
O O O O O O O O O O			0		
O O O O O O O O O O			0		
O O O O O O O O O O			0)	
Total. (Column (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 val Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description Other Liabilities See Form 990, Part X, col. (B) line 15.) Part X Other Liabilities See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes O					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15. (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					·
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15. Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. See Form 990, Part X, tine 25. 1. (a) Description (b) Amount Federal income taxes 0					
Total. (Column (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 val Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0				· · · · · · · · · · · · · · · · · · ·	
Total. (Column (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 val Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description (b) Amount Federal income taxes 0					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0		See Form 990, Pa	ort X, line 15.		(b) Book value
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					(
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					(
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0			· · · · · · · · · · · · · · · · · · ·	*****	(
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0		···			. (
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					(
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0			· · · · · · · · · · · · · · · · · · ·		(
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0					(
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount Federal income taxes 0 0	Total, (Column (b) must equal	Form 990. Part X. co	ol. (B) line 15.)		
1. (a) Description of liability (b) Amount Federal income taxes 0 0					
0					
	Federal income taxes			0	
0				0	
					
0					
<u></u>					
		+	·		
				 	
			·		
0			· 		
0				 	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) □	Total. (Column (b) must equal Form 990, Par	t X, col (B) tine 25)		0	

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

Page 3

Hand in Hand American Friend	s of the Center for Jewish-A	Arab Education 93-1269590
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Sched	tule D (Form 990) 2009		Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financia	i State	ments
1	·Total revenue (Form 990, Part VIII, column (A), line 12)	1	848,920
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,001,925
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-153,005
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	· · · · · · · · · · · · · · · · · · ·
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-153,005
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	848,920
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants	_	
d	Other (Describe in Part XIV)	_	
е	Add lines 2a through 2d	2€	
3	Subtract line 2e from line 1	3	848,920
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	. 40	
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		1
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es per	
1	Total expenses and losses per audited financial statements	1	1,001,925
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	_	
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2€	
3	Subtract line 2e from line 1	3	1,001,925
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	İ	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV.)		_
С	Add lines 4a and 4b	40	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,001,925
Com	TXIV Supplemental Information splete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a 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 part to provide any additional information.		

Hand in Hand American Friends of the Center for Jewish-Arab Education 93-1269590 Schedule D (Form 990) 2009 Page 5 Part XIV Supplemental Information (continued)

Schedule F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

Hand in Hand American Friends of the Center for Jewish-Arab Education

OMB No 1545-0047 Open to Public Inspection

93-1269590

Name of the organization

Department of the Treasury Internal Revenue Service

► See separate instructions.

Employer identification number

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total expenditures for offices in the employees or region (by type) (i.e., a program service, region fundraising, program services, describe specific type of region agents in grants to recipients located in service(s) in region region the region) Middle East and North Africa Ogrants to recipient located in N/A 673,330 0 Middle East and North Africa 29,897 youth exchange 0 0|program service 0 703,227 0 Totals .

Education
Jewish-Arab
he Center for
Friends of t
d American
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Page 2

93-1269590

Schedule F (Form 990) 2009

art II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered if estimination by Part IV, line 15, for any recipient who received more than \$5,000	tance to Organi: icipient who recei 990) if additional	zations or Entities ived more than \$5,0 space is needed.	Outside the Ur 00. Check this t	ox if no one re	complete ir the acipient receive	organization ansi ed more than \$5,0	wered res ro	
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Middle East and North Africa	educat & comm progms	673,330	673,330 wire transfer	0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
•					0		0		

Schedule F (Form 990) 2009 Enfer fotal number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

Enter total number of other organizations or entities.

Hand in Hand American Friends of the Center for Jewish-Arab Education

Schedule F (Form 990) 2009

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1(Form 990) if additional space is needed. Part III

Schedule F (Form 990) 2009 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance 0 O 0 0 (f) Amount of non-cash assistance cash disbursement (e) Manner of 0 0 0 0 (d) Amount of cash grant 0 0 0 0 0 0 ō 0 0 0 0 0 0 0 0 (c) Number of recipients (b) Region (a) Type of grant or assistance

Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information	
Part I Line 2 HIH requires the Israel center to submit quarterly reports on the use of all	
grant funds (if for general operating support, a more general report; if for specific	
projects, a detailed report on the particular project). Included in this is an evaluation	
of the success and impact of programs and projects. In addition the Executive Director of	
HIH has regular phone calls with the staff in Israel, including weekly or bi-weekly calls	·····
with the Executive Director in Israel.	
	••••

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

Employer identification number

Hand in Hand American Friends of the Center for Jewish-Arab Education	93-1269590
Form 990 Part VI Section B Line 11A The 990 is reviewed by the Executive Director. It is then	
emailed to board members before filing.	
Form 990 Part VI Section B Line 15a The salary for the Executive Director was set by the board	
of directors (an independent body) four years ago. It has stayed at that level since that	
time	<u></u>
Form 990 Part VI Section C Line 19 Financial statements are available upon request Requests	
for other documents are considered on a case-by-case basis	