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

Form **990**

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07/01 , 2010, and ending 06/30 , 20 11

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

C Name of organization: Jewish Federation of Northern New Jersey Inc

Doing Business As:

Number and street (or P O. box if mail is not delivered to street address): 50 Eisenhower Drive

Room/suite:

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

D Employer identification number: 20-1195592

E Telephone number: 201-820-3900

G Gross receipts $ 25,102,728

F Name and address of principal officer: Jason Shames
50 Eisenhower Drive, Paramus, NJ 07960

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

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ www.jfnnj.org

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

L Year of formation: 2004

M State of legal domicile: NJ

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: Jewish Federation of Northern New Jersey adds value by providing the leadership necessary to create a strong, collaborative, caring and vibrant Jewish community in northern New Jersey and abroad.

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	103
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	103
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	80
6	Total number of volunteers (estimate if necessary)	6	2,000
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	12,033,927	11,012,568
9	Program service revenue (Part VIII, line 2g)	634,758	768,282
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,510,527	553,108
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	281,245	205,523
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,460,457	12,539,481

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,666,033	5,743,537
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	4,197,992	3,843,681
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16,836	19,879
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,394,108		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	2,489,819	2,487,074
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	12,370,680	12,094,171
19	Revenue less expenses. Subtract line 18 from line 12	2,089,777	445,310

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	61,229,130	67,012,430
21	Total liabilities (Part X, line 26)	31,531,589	33,240,159
22	Net assets or fund balances. Subtract line 21 from line 20	29,697,541	33,772,271

SCANNED JUN 21 2012

RECEIVED MAY 21 2012 OGDEN UT

Part II Signature Block

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

Sign Here

Signature of officer — Date: 5/14/12

Jason Shames, Chief Executive Officer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2010)

C 22-24

19

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☐

1 Briefly describe the organization's mission:

Jewish Federation of No New Jersey is the central fundraising & planning organization serving the Jewish community in northern New Jersey. It serves as the central unifying force of a diverse Jewish population & strives to build partnerships with other communities & groups in the area. JFNNJ supports over 84 beneficiary & affiliated agencies, and community services that provide humanitarian, social service, cultural & educational needs locally, in Israel and in 60 countries around the world.

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 ☑ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 6,321,268 including grants of $ 5,743,537) (Revenue $ 0)

Grants and allocations are given by Jewish Federation of Northern New Jersey to over 225 501(c)(3) organizations which provide humanitarian, social service, cultural and educational needs locally, nationwide and around the world.

4b (Code:) (Expenses $ 411,547 including grants of $ 0) (Revenue $ 34,836)

JFNNJ's Synagogue Leadership Initiative provides services for rabbis and synagogue members to address a wide range of issues and challenges facing congregations in the community, such as attracting and maintaining congregation members. Programs assist in areas of strategic planning, fund raising, outreach, programming, leadership development, and developing a needs assessment plan.

4c (Code:) (Expenses $ 385,116 including grants of $ 0) (Revenue $ 297,710)

JFNNJ's Council for Older Adults operates and sponsors Kosher Meals on Wheels, a program which provides congregate meals in 3 locations, serving over 51,600 meals annually. The Council not only provides healthy nutrition, but also companionship and socialization for elderly members of the community.

4d Other program services. (Describe in Schedule O.) See Schedule O, Statement 1
(Expenses $ 1,299,210 including grants of $ 0) (Revenue $ 435,736)

4e **Total program service expenses** ▶ 8,417,141

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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	✓	
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		✓
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *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	✓	
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
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	✓	
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	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	✓	
b	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*	11b		✓
c	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*	11c		✓
d	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*	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	✓	
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	✓	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	✓	
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, Parts II and IV*	15	✓	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		✓
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 (see instructions)*	17	✓	
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	✓	
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	✓	
20 a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		✓
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✓	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		✓
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	✓	
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	✓	
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		✓
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		✓
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		✓
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		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		✓
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	✓	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	✓	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ Yes ☑ No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	36		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
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	80		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file.* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			✓
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			✓
b	If "Yes," enter the name of the foreign country: ▶ ---------- See instructions for 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			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
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:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
11	**Section 501(c)(12) organizations.** Enter:				
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 amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . .	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* .	14b			

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.*

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . .	1a	103		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	103		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓	
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			✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			✓
6	Does the organization have members or stockholders?	6			✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a			✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b			✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		✓	
b	Each committee with authority to act on behalf of the governing body?	8b		✓	
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*	9			✓

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

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

Section C. Disclosure

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

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

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Robin Greenfield, (201)820-3900

50 Eisenhower Drive, Paramus, NJ 07652

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

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.

- 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, if any. 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Howard E Charish Exec VP, Asst Secretary	45	✓		✓				230,323	0	22,247
Alan Scharfstein President	2	✓		✓				0	0	0
Jeffrey Bolson Treasurer	2	✓		✓				0	0	0
Joan Krieger Assistant Treasurer	2	✓		✓				0	0	0
Philip Moss Secretary	2	✓		✓				0	0	0
Leslie Billet Vice President	2	✓		✓				0	0	0
Gail Billig Vice President	2	✓		✓				0	0	0
David J Goodman Vice President	2	✓		✓				0	0	0
Sue Ann Levin Vice President	2	✓		✓				0	0	0
Dr Zvi Marans Vice President	2	✓		✓				0	0	0
Jayne Petak Vice President	2	✓		✓				0	0	0
Daniel M Shlufman Esq Vice President	2	✓		✓				0	0	0
David Smith Vice President	2	✓		✓				0	0	0
Jan Seligmann Weiss Vice President	2	✓		✓				0	0	0
Wilson Aboudi Trustee	0	✓						0	0	0
Dana Post Adler Trustee	0	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Lauri Bader Trustee	0	✓						0	0	0
Barry Badner Trustee	0	✓						0	0	0
Adolph Berman Trustee	0	✓						0	0	0
Dr Lawrence Berman Trustee	0	✓						0	0	0
Ellen Bernstein Trustee	0	✓						0	0	0
David Bindelglass Trustee	0	✓						0	0	0
Gale S Bindelglass Trustee	0	✓						0	0	0
Myrna Block Trustee	0	✓						0	0	0
Robert Boiarsky Trustee	0	✓						0	0	0
Rabbi Neal Borovitz Trustee	0	✓						0	0	0
Margot Brandes Trustee	0	✓						0	0	0
Paula Cantor Trustee	0	✓						0	0	0
Howard Chernin Trustee	0	✓						0	0	0
Ralph Cheifetz Trustee	0	✓						0	0	0
David Cohen Trustee	0	✓						0	0	0
Martha Cohen Trustee	0	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Martin Cohen Trustee	0	✓						0	0	0
Dr Leonard Cole Trustee	0	✓						0	0	0
Ruth Cole Trustee	0	✓						0	0	0
Amy Cushmaro Trustee	0	✓						0	0	0
Edward J Dauber Esq Trustee	0	✓						0	0	0
Stacey Distell Trustee	0	✓						0	0	0
Julius Eisen Trustee	0	✓						0	0	0
Lawrence Eisen Trustee	0	✓						0	0	0
Bambi Epstein Trustee	0	✓						0	0	0
Carl Epstein Trustee	0	✓						0	0	0
Jodi Epstein Trustee	0	✓						0	0	0
Merle Fish Trustee	0	✓						0	0	0
Esther Fishman Trustee	0	✓						0	0	0
Laura Freeman Trustee	0	✓						0	0	0
Alan M Gallatin Esq Trustee	0	✓						0	0	0
Sharyn J Gallatin Trustee	0	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Eva Lynn Gans Trustee	0	✓						0	0	0
Dr Sandra Gold Trustee	0	✓						0	0	0
Stephanie Goldman-Pittel Trustee	0	✓						0	0	0
Lawrence Goodman Trustee	0	✓						0	0	0
Steven Morey Greenberg Esq Trustee	0	✓						0	0	0
Dr David Greenblatt Trustee	0	✓						0	0	0
Ted Greenwood Trustee	0	✓						0	0	0
Dr Bernard Hammer Trustee	0	✓						0	0	0
Yona Hermann Trustee	0	✓						0	0	0
Betty Hershan Trustee	0	✓						0	0	0
Harry Immerman Trustee	0	✓						0	0	0
Gilon Irwin Trustee	0	✓						0	0	0
Arthur H Joseph Trustee	0	✓						0	0	0
Joyce Joseph Trustee	0	✓						0	0	0
Dr Jeffrey Kern Trustee	0	✓						0	0	0
Daniel Kirsch Esq Trustee	0	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Laura Kirsch Esq Trustee	0	✓						0	0	0
Rena Klosk Trustee	0	✓						0	0	0
Peter Kolben Trustee	0	✓						0	0	0
Bernard Koster Esq Trustee	0	✓						0	0	0
Madelene Kupperman Trustee	0	✓						0	0	0
Fred Lafer Trustee	0	✓						0	0	0
Seth Lipschitz Trustee	0	✓						0	0	0
George Liss Trustee	0	✓						0	0	0
Bruce Mactas Trustee	0	✓						0	0	0
Rabbi Randall Mark Trustee	0	✓						0	0	0
Gregory Meisel Trustee	0	✓						0	0	0
Lisa Beth Meisel Trustee	0	✓						0	0	0
Rita Merendino Trustee	0	✓						0	0	0
Mark Metzger Trustee	0	✓						0	0	0
Linda Mirelson Trustee	0	✓						0	0	0
Dr David Namerow Trustee	0	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
David Opper Trustee	0	✓						0	0	0
Alex Paley Trustee	0	✓						0	0	0
Susan Penn Trustee	0	✓						0	0	0
Alvin Reisbaum Trustee	0	✓						0	0	0
Jonathan Rochlin Trustee	0	✓						0	0	0
Ronald Rosensweig Esq Trustee	0	✓						0	0	0
Daniel Rubin Trustee	0	✓						0	0	0
Sylvia Safer Trustee	0	✓						0	0	0
Karen Scharfstein Trustee	0	✓						0	0	0
Norman Seiden Trustee	0	✓						0	0	0
Paula Shaimann Trustee	0	✓						0	0	0
Susan Sher Trustee	0	✓						0	0	0
Carol Silberstein Trustee	0	✓						0	0	0
Daniel Silna Trustee	0	✓						0	0	0
Ava Silverstein Trustee	0	✓						0	0	0
Helen Singer-Katz Trustee	0	✓						0	0	0

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Leon Sokol Esq Trustee	0	✓						0	0	0
Michael Starr Trustee	0	✓						0	0	0
Dr Justin Straus Trustee	0	✓						0	0	0
Henry Taub Trustee	0	✓						0	0	0
Dr Theodore Tobias Trustee	0	✓						0	0	0
Henry Voremberg Trustee	0	✓						0	0	0
Arlene Weiss Trustee	0	✓						0	0	0
Robert Yudin Trustee	0	✓						0	0	0
David Gad-Harf Chief Operational Officer	45			✓				150,444	0	25,526
Robin Greenfield Chief Financial Officer	45			✓				140,174	0	23,139
Lawrence Cohen Chief Development Officer	45			✓				153,668	0	7,886
David Moss Director for Endowment	45			✓				155,073	0	861
1b **Sub-total** ▶								829,682	0	79,659
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶								829,682	0	79,659

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

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

Section B. Independent Contractors

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

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

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 ▶

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a	0				
	b Membership dues	1b	0				
	c Fundraising events	1c	2,869,167				
	d Related organizations	1d	0				
	e Government grants (contributions)	1e	0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8,143,401				
	g Noncash contributions included in lines 1a-1f: $		791,972				
	h **Total.** Add lines 1a–1f ▶			11,012,568			
Program Service Revenue		Business Code					
	2a Grant income	900099		532,665	532,665	0	0
	b Community programs income	900099		202,263	202,263	0	0
	c Non-campaign events	900099		33,354	33,354	0	0
	d						
	e						
	f All other program service revenue			0	0	0	0
	g **Total.** Add lines 2a–2f ▶			768,282			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			288,344	0	0	288,344
	4 Income from investment of tax-exempt bond proceeds ▶			0	0	0	0
	5 Royalties ▶			0	0	0	0
		(i) Real	(ii) Personal				
	6a Gross Rents	126,742	0				
	b Less. rental expenses	98,905	0				
	c Rental income or (loss)	27,837	0				
	d Net rental income or (loss) ▶			27,837	0	0	27,837
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	12,392,142	0				
	b Less: cost or other basis and sales expenses	12,127,378	0				
	c Gain or (loss)	264,764	0				
	d Net gain or (loss) ▶			264,764	0	0	264,764
	8a Gross income from fundraising events (not including $ 2,869,167 of contributions reported on line 1c). See Part IV, line 18 a		182,439				
	b Less: direct expenses b		336,964				
	c Net income or (loss) from fundraising events ▶			-154,525		0	-154,525
	9a Gross income from gaming activities. See Part IV, line 19 a		28,642				
	b Less: direct expenses b		0				
	c Net income or (loss) from gaming activities ▶			28,642	0	0	28,642
	10a Gross sales of inventory, less returns and allowances a						
	b Less: cost of goods sold b						
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue	Business Code					
	11a Administrative Fee Income	561000		263,262	0	0	263,262
	b Miscellaneous expenses	900099		40,307	0	0	40,307
	c						
	d All other revenue			0	0	0	0
	e **Total.** Add lines 11a–11d ▶			303,569			
	12 **Total revenue.** See instructions. ▶			12,539,481	768,282	0	758,631

Part IX Statement of Functional Expenses

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

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	5,743,537	5,743,537		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	835,267	132,918	357,948	344,401
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	2,421,717	1,199,642	569,223	652,852
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	282,971	106,940	85,901	90,130
10	Payroll taxes	303,726	133,632	84,158	85,936
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	6,785	0	6,785	0
c	Accounting	69,414	0	69,414	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	19,879			19,879
f	Investment management fees	98,320	0	98,320	0
g	Other	544,950	277,931	267,019	0
12	Advertising and promotion	78,159	47,371	30,269	519
13	Office expenses	182,228	73,246	94,254	14,728
14	Information technology	23,409	6,233	17,176	0
15	Royalties	0	0	0	0
16	Occupancy	171,011	27,692	143,319	0
17	Travel	40,150	25,845	14,305	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	13,995	5,779	7,351	865
20	Interest	70,819	24,877	45,942	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	292,633	96,022	196,611	0
23	Insurance	55,990	17,693	38,297	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a	Program services	421,801	421,801	0	0
b	Bad debt	175,373	0	0	175,373
c	Equipment rental	76,379	25,370	51,009	0
d	Change in valuation allowance	62,038	0	62,038	0
e	Investment expense and other expenses	103,620	50,612	43,583	9,425
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	12,094,171	8,417,141	2,282,922	1,394,108
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		1,898,582	2	2,425,621
	3	Pledges and grants receivable, net		7,536,372	3	7,134,041
	4	Accounts receivable, net		187,074	4	222,472
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		0	6	0
	7	Notes and loans receivable, net		76,000	7	71,000
	8	Inventories for sale or use			8	0
	9	Prepaid expenses and deferred charges		48,581	9	60,553
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 9,878,573			
	b	Less: accumulated depreciation	10b 1,584,458	8,472,477	10c	8,294,115
	11	Investments—publicly traded securities		42,648,402	11	48,418,024
	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		361,642	15	386,604
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		61,229,130	16	67,012,430
Liabilities	17	Accounts payable and accrued expenses		924,709	17	837,524
	18	Grants payable		4,647,354	18	4,684,345
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		4,400,000	20	3,800,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		17,668,465	21	20,211,339
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		126,391	23	119,330
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities. Complete Part X of Schedule D		3,764,670	25	3,587,621
	26	**Total liabilities.** Add lines 17 through 25		31,531,589	26	33,240,159
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		21,563,923	27	25,491,970
	28	Temporarily restricted net assets		8,133,618	28	8,280,301
	29	Permanently restricted net assets		0	29	0
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		29,697,541	33	33,772,271
	34	Total liabilities and net assets/fund balances		61,229,130	34	67,012,430

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,539,481
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,094,171
3	Revenue less expenses. Subtract line 2 from line 1	3	445,310
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	29,697,541
5	Other changes in net assets or fund balances (explain in Schedule O)	5	3,629,420
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	33,772,271

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	✓	
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 separate basis, consolidated 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		✓
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)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
Jewish Federation of Northern New Jersey Inc	20-1195592

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

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

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

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

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

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

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

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

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

9 ☐ An organization that normally receives: (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

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

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

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

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

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

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

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

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

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22,446,657	15,887,483	10,685,249	11,949,927	10,939,996	71,909,312
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3	22,446,657	15,887,483	10,685,249	11,949,927	10,939,996	71,909,312
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						8,911,030
6 **Public support.** Subtract line 5 from line 4.						62,998,282

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	22,446,657	15,887,483	10,685,249	11,949,927	10,939,996	71,909,312
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	696,803	820,028	618,087	712,042	415,086	3,262,046
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1,121,465	948,816	1,422,109	931,920	1,071,851	5,496,161
11 **Total support.** Add lines 7 through 10						80,667,519
12 Gross receipts from related activities, etc. (see instructions)					12	0

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	78.1 %
15	Public support percentage from 2009 Schedule A, Part II, line 14	15	80.07 %

16a **33 1/3% support test—2010.** 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—2009.** 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—2010.** 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—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .						
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						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f)) . . .	17	%
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . ▶ ☐

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

General Explanation - Line 10, Other Income includes Program Service Revenue, Adminsitrative Fee Income and Miscellaneous income. COL (a) Progr Serv Rev 494,073; Admin Fee Inc 591,062; Misc 36,330 Total COL (a) 1,121,465; COL (b) Progr Serv Rev 575,541; Admin Fee Inc 313,852; Misc 59,423 Total COL (b) ; COL (c) Progr Serv Rev 1,099,969; Admin Fee Inc 263,398; Misc 58,742; Total COL (c) 1,422,109; COL (d) Progr Serv Rev 634,758; Admin Fee Inc 257,408; Misc 39,754 Total COL (d) 931,920; COL (e) Progr Serv Rev 768,282; Admin Fee Inc 263,262; Misc 40,307 Total COL (e) 1,071,851.

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

2010

Open to Public Inspection

Name of the organization	Employer identification number
Jewish Federation of Northern New Jersey Inc	20-1195592

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	115	344
2	Aggregate contributions to (during year)	1,055,094	941,266
3	Aggregate grants from (during year)	1,365,344	2,201,233
4	Aggregate value at end of year	11,435,098	36,638,863

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	42,328,038	38,623,204	52,369,912		
b	Contributions	1,996,360	2,677,780	1,864,396		
c	Net investment earnings, gains, and losses	7,804,157	4,980,368	-11,094,053		
d	Grants or scholarships	3,566,577	3,441,177	4,180,702		
e	Other expenditures for facilities and programs	0	0	0		
f	Administrative expenses	488,017	512,137	336,349		
g	End of year balance	48,073,961	42,328,038	38,623,204		

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

a Board designated or quasi-endowment ▶ 82 %
b Permanent endowment ▶ 0 %
c Term endowment ▶ 18 %

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

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

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

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

	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	2,282,711		2,282,711
b	Buildings	0	6,803,609	993,035	5,810,574
c	Leasehold improvements	0	0	0	0
d	Equipment	0	785,110	584,280	200,830
e	Other	0	7,143	7,143	0
Total.	Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				8,294,115

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
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 value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
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
(1) Federal income taxes	0
(2) Gift annuities payable	3,587,621
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	3,587,621

2. FIN 48 (ASC 740) 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 (ASC 740).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,539,481
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,094,171
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	445,310
4	Net unrealized gains (losses) on investments	4	3,629,420
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	3,629,420
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	4,074,730

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

1	Total revenue, gains, and other support per audited financial statements			1	16,123,152
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	3,629,420		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIV.)	2d	435,869		
e	Add lines **2a** through **2d**			2e	4,065,289
3	Subtract line **2e** from line **1**			3	12,057,863
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIV.)	4b	481,618		
c	Add lines **4a** and **4b**			4c	481,618
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	12,539,481

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

1	Total expenses and losses per audited financial statements			1	12,048,422
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIV.)	2d	435,869		
e	Add lines **2a** through **2d**			2e	435,869
3	Subtract line **2e** from line **1**			3	11,612,553
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIV.)	4b	481,618		
c	Add lines **4a** and **4b**			4c	481,618
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	12,094,171

Part XIV Supplemental Information

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

Schedule D, Part IV, Line 2b - Jewish Federation of Northern New Jersey as custodian, provides endowment managagement and investment services to beneficiary, non-profit organizations located in northern New Jersey. Ownership of the assets of the beneficiary agencies are retained by the respective agencies and are commingled for investment purposes with the assets of JFNNJ. In exchange for services provided by JFNNJ, agencies pay an admisnitrative fee.

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

Schedule D, Part X, Line 2 - Jewish Federation of Northern New Jersey is exempt from federal income taxes under the provisions of Section 501(c)(3) of the Internal Revenue Code and from state and local taxes under comparable laws. Accordingly, no provision for

Part XIV - Supplemental Information (Continued)

income taxes has been recorded in the statements of activities and changes in net assets. There are no uncertain tax positions. JFNNJ had no unrecognized tax benefits at June 30, 2011 and no open years subject to examination prior to June 30, 2008. In addition, JFNNJ has no income tax related penalties or interest.

Schedule D, Part XII, Line 2d - Fundraising Events Expenses of 336,964 are presented in Part VIII, Line 8b as an offset to Gross Income from Fundraising Events and Rental Expenses of 98,905 are presented in Part VII, Line 6b as an offset to Gross Rents. The total is 435,869. For financial statement purposes, both Fundraising Income and Rent Income were presented as gross amounts.

Schedule D, Part XII, Line 4b - This represents donor designated contributions which for financial statement presentation were deducted from gross contributions.

Schedule D, Part XIII, Line 2d - Fundraising Events Expenses of 336,964 are presented in Part VIII, Line 8b as an offset to Gross Income from Fundraising Events and Rental Expenses of 98,905 are presented in Part VII, Line 6b as an offset to Gross Rents. The total is 435,869. For financial statement purposes, both Fundraising Income and Rent Income were presented as gross amounts.

Schedule D, Part XIII, Line 4b - This represents donor designated grants which for financial statement presentation were deducted from grants and allocation expenses.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

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

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

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

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Middle East and North Africa	1	1	Program Services	Sch F part V	47,800
(2) Middle East and North Africa	0	0	Investments	Sch F part V	0
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					
b Total from continuation sheets to Part I					
c **Totals** (add lines 3a and 3b)	1	1			47,800

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . ▶ ☐
Part II can be duplicated if additional space is needed.

1 (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)
(1)		Middle East and	Sch F Part V	2,342,883	cash payment	0		N/A
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2 Enter total 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 . . . . . ▶

3 Enter total number of other organizations or entities . . . . . ▶

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)*	☐ Yes	☑ No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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

Schedule F, Part I, Line 3 - JFNNJ has investments in State of Israel Bonds only.

Schedule F, Part II, Line 1 - Jewish Federaton of Northern New Jersey reports grants on Schedule I to the Jewish Federations of North America (JFNA) and the American Jewish Joint Distribution Committee (JDC) which are domestic U.S. charities. JFNA makes some distributions directly to JDC and to the American charity, Jewish Agency for Israel (JAFI). All three agences then send a portion of the grants to nonprofit organizations in Israel and other countries. JFNA, JAFI and JDC each file separate Form 990s and report each specific grant in detail on their Schedule F.

SCHEDULE G
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization
Jewish Federation of Northern New Jersey Inc

Employer identification number
20-1195592

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

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

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

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1 See Schedule G, Part IV, Statement 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				62,994	19,879	43,115

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

NJ

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 Super Sunday Telet (event type)	(b) Event #2 Operation Lift-off (event type)	(c) Other events 22 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	998,610	647,300	1,405,696	3,051,606
	2 Less: Charitable contributions	998,610	647,300	1,223,257	2,869,167
	3 Gross income (line 1 minus line 2)	0	0	182,439	182,439
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	44,425	44,425
	7 Food and beverages	1,503	238	99,347	101,088
	8 Entertainment	0	0	30,150	30,150
	9 Other direct expenses	32,221	152	128,928	161,301
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(336,964)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				-154,525

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col (c))
Revenue	1 Gross revenue	0	0	28,642	28,642
Direct Expenses	2 Cash prizes	0	0	0	0
	3 Noncash prizes	0	0	0	0
	4 Rent/facility costs	0	0	0	0
	5 Other direct expenses	0	0	0	0
	6 Volunteer labor	☐ Yes % ☑ No	☐ Yes % ☑ No	☑ Yes 50 % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				(0)
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				28,642

9 Enter the state(s) in which the organization operates gaming activities: NJ

a Is the organization licensed to operate gaming activities in each of these states? ☑ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☑ No

b If "Yes," explain:

11 Does the organization operate gaming activities with nonmembers? . . . . . ☐ Yes ☑ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☑ No

13 Indicate the percentage of gaming activity operated in:

a	The organization's facility	13a	0 %
b	An outside facility	13b	100 %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ In-house event activity

Address ▶ 50 Eisenhower Dr Paramus, NJ 07960

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☑ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____ .

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ $ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☑ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $ 0

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

20-1195592

Fundraiser Activity Information

Name and Address	Activity	C1	Gross Receipts	C2	C3
Lester Inc 19 Business Park Drive Branford, CT 06405	Tele-funding services	No	9,782	7,491	2,291
Siegel Marketing Group PO Box 686598 Chicago, IL 60695-6598	Tele-funding services	No	53,212	12,388	40,824
Total:			**62,994**	**19,879**	**43,115**

C1 = Fundraiser control of funds?
C2 = Amount paid to (or retained by) fundraiser
C3 = Amount paid to (or retained by) organization

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Sch I, Stmt 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶ 228

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

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

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

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

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Amount of cash grant	Amount of non-cash assistance
Name and address	Abraham Joshua Heschel School 270 West 89th Street New York, NY 10024	43,000	
EIN	13-3091539		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	General support		
Name and address	Agudath Israel of America 42 Broadway 14th floor New York, NY 10004	7,500	
EIN	13-5604164		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	General support		
Name and address	Alzheimers Assn of Greater NJ 400 Morris Ave Suite 251 Denville, NJ 07834	5,750	
EIN	13-3039601		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	General support		
Name and address	American Friends of Bet El Yeshiva Center 68 27 Juno Street Forest Hills, NY 11375	20,000	
EIN	11-2586564		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	General support		
Name and address	American Friends of Hebrew University 1 Battery Park Plaza 25th floor New York, NY 10004	6,500	
EIN	13-1568923		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	General support		
Name and address	American Friends of Shalom Hartman Institute 1 Pennsylvania Plaza Suite 1606 New York, NY 10119	8,000	
EIN	13-3014387		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			

cash assistance		
Purpose of grant	General support	
Name and address	American Jewish Joint Distribution Committee 711 Third Avenue New York, NY 10017	129,704
EIN	13-1656634	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	Jewish Federaton of Northern New Jersey also reports these grants on Schedule F which are remitted to the American Jewish Joint Distribution Committee (JDC), a domestic U S. charity JDC sends a portion of the grants to nonprofit organizations in Israel and other countries. The American Jewish Joint Distribution Committee (JDC) files a separate Form 990 and reports each specific grant in detail on their Schedule F	
Name and address	Arnold P Gold Foundation 619 Palisade Avenue Englewood Cliffs, NJ 07632	20,250
EIN	22-3052098	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Barnert Temple 747 Route 208 South Franklin Lakes, NJ 07417	7,800
EIN	22-1589196	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Ben Porat Yosef East 243 Frisch Court Paramus, NJ 07417	15,225
EIN	22-2368804	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Bergen County High School of Jewish Studies 940 Main Street Hackensack, NJ 07601	50,250
EIN	22-2267197	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Bergen County Y JCC 605 Pascack Road	132,610

	Twp of Washington, NJ 07676	
EIN	22-1487394	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support Kehillah Partnership	
Name and address	Boys Town Jerusalem Foundation of America One Penn Plaza Suite 6250 New York, NY 10119	7,006
EIN	11-5324002	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Breast Cancer Research Foundation 60 East 56th Street 8th floor New York, NY 10022	230,550
EIN	13-3727250	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Chamah 27 William Street Suite 613 New York, NY 10005	6,500
EIN	23-7365688	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Congregation Rinat Yisrael 389 West Englewood Ave Teaneck, NJ 07666	7,500
EIN	22-2211015	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Crohn's and Colitis Foundation of America NY Chapter 386 Park Avenue South 14th Floor New York, NY 10016	25,000
EIN	13-6193105	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Daughters of Minam Center 155 Hazel Street Clifton, NJ 07011	77,150
EIN	22-1500504	

IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Englewood Hospital & Medical Center 350 Engle Street Englewood, NJ 07631	5,300
EIN	22-1487173	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Englewood Hospital Medical Center Foundation 350 Engle Street Englewood, NJ 07631	7,300
EIN	22-3367281	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Fair Lawn High School 14 00 Berdan Ave Fair Lawn, NJ 07410	5,800
EIN	22-6001795	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Friends of Camp Young Judaea Sprout Lake 1383 Ave of the Americas New York, NY 10019	8,053
EIN	37-1595626	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Friends of Ofanim 308 Lancaster Ave Wynnewood, PA 19096	8,500
EIN	20-2749756	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Frisch School 120 West Century Road Paramus, NJ 07652	21,245
EIN	22-1937461	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-		

cash assistance		
Purpose of grant	General support	
Name and address	Gerrard Berman Day School 45 Spruce St Oakland, NJ 07436	66,790
EIN	22-2635691	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Holy Name Hospital Foundation 718 Teaneck Road Teaneck, NJ 07666	20,000
EIN	22-1487322	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jackson Gabriel Silver Foundation 1202 Lexington Avenue Suite 202 New York, NY 10028	5,500
EIN	27-2417202	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jewish Association for Developmental Disabilites 190 Moore Street Suite 410 Hackensack, NJ 07601	15,726
EIN	22-2842847	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jewish Center of Teaneck 70 Sterling Place Teaneck, NJ 07666	54,500
EIN	22-1511303	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jewish Education for Special Children 666 Kinderkamack Road River Edge, NJ 07661	8,250
EIN	52-1586927	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jewish Family Service of Bergen County	453,787

	1485 Teaneck Road Teaneck, NJ 07666	
EIN	22-2223109	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General Support; Economic Crisis, Collaboration Initiative	
Name and address	Jewish Family Service of North Jersey 1 Pike Drive Wayne, NJ 07470	387,030
EIN	22-1487228	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General Support; Economic Crisis; Collaboration Initiative	
Name and address	Jewish Federation of Palm Beach County 4601 Community Drive West Palm Beach, FL 33417	18,700
EIN	59-0948696	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jewish Federations of North America 25 Broadway Suite 1700 New York, NY 10004	2,213,179
EIN	13-1624240	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	Jewish Federation of Northern New Jersey also reports these grants on Schedule F which are remitted to the Jewish Federations of North America (JFNA), a domestic U.S charity. Some distributions of funds are made directly to the American charity, Jewish Agency for Israel (JAFI). JFNA also sends a portion of the grants to nonprofit organizations in Israel and other countries JFNA and JAFI each file separate Form 990s and report each specific grant in detail on their Schedule F	
Name and address	Jewish Home Family 10 Link Drive Rockleigh, NJ 07647	100,250
EIN	22-3466678	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Jewish Home Foundation of North Jersey Inc 10 Link Drive Rockleigh, NJ 07647	41,572

EIN	52-1720580	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Jewish National Fund NY 78 Randall Avenue Rockville Centre, NY 11570	10,000
EIN	13-1659627	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Kaplen JCC on the Palisades 411 E Clinton Avenue Tenafly, NJ 07670	168,540
EIN	22-1487220	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	League School 30 Washington Street Brooklyn, NY 11201	10,000
EIN	11-1714376	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Ma' ayanot Yeshiva High School for Girls 1650 Palisade Avenue Teaneck, NJ 07666	8,085
EIN	22-3383708	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Masorti Foundation for Conservative Judaism in Israel 475 Riverside Drive Suite 832 New York, NY 10115	50,018
EIN	13-1810938	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

Name and address	Mechon Hadar 190 Amsterdam Avenue New York, NY 10023	10,000
EIN	26-4412164	
IRC code section	501(c)(3)	

Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Monah School 53 South Woodland Avenue Englewood, NJ 07631	30,485
EIN	22-1766272	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Morse Life Foundation 4847 Fred Gladstone Drive West Palm Beach, FL 33417	50,000
EIN	65-0329966	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Na'amat USA 350 Fifth Ave New York, NY 10118	56,758
EIN	22-1487222	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	PEF Israel Endowment Funds 317 Madison Ave Suite 607 New York, NY 10017	10,000
EIN	13-5590516	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Ramaz School 125 East 85th Street New York, NY 10028	7,500
EIN	13-6104086	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Rosenblum Yeshiva of North Jersey 666 Kinderkamack Rd River Edge, NJ 07661	31,150
EIN	22-1526652	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		

Purpose of grant	General support	
Name and address	Rosenthal Institute Grad Center Holocaust Studies 365 5th Ave Room 5301 New York, NY 10016	9,800
EIN	13-3893536	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Rutgers University Foundation Winants Hall 7 College Avenue New Brunswick, NJ 08901	22,340
EIN	26-0177367	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Rutgers University Hillel 93 College Avenue New Brunswick, NJ 08901	15,500
EIN	23-7318742	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General Support Israel Engagmt Incentive	
Name and address	Schechter Institutes Inc 2300 Computer Avenue Suite D18 Willow Grove, PA 19090	7,200
EIN	22-3342043	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Shelter our Sisters 405 State Street Hackensack, NJ 07601	7,750
EIN	22-2184949	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Sinai Special Needs Institute 1485 Teaneck Road Suite 300 Teaneck, NJ 07666	35,198
EIN	22-2942402	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Solomon Schechter Day School of Bergen County 275 McKinley Ave	34,380

	New Milford, NJ 07646	
EIN	23-7370024	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Temple Avodat Shalom 385 Howland Avenue River Edge, NJ 07661	5,745
EIN	22-6046606	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Temple Beth El 221 Schraalenburgh Road Closter, NJ 07624	10,000
EIN	22-1684562	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Temple Beth Shalom 108 Freehold Road Manalapan, NJ 07726	6,000
EIN	22-2208287	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Temple EmanuEl of Closter 180 Piermont Road Closter, NJ 07624	15,300
EIN	22-1589223	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Temple Emanuel of North Jersey 814 Franklin Avenue Franklin Lakes, NJ 07417	30,000
EIN	22-1487357	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Torah Academy of Bergen County 1600 Queen Anne Road Teaneck, NJ 07666	9,450
EIN	22-2890836	
IRC code section	501(c)(3)	

Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Washington Institute for Near East Policy 1828 L Street NW Suite 1050 Washington, DC 20036	10,000
EIN	52-1376034	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Yavneh Academy 155 Fairview Avenue Paramus, NJ 07652	23,905
EIN	22-1613659	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	Yeshiva University 500 West 185 th Street New York, NY 10033	50,000
EIN	13-1624225	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General Support Azrieli Benchmark Study	
Name and address	Yeshivat Noam 70 West Century Road Paramus, NJ 07652	30,514
EIN	22-3722875	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	
Name and address	The Wayne Y One Pike Drive Wayne, NJ 07470	100,605
EIN	22-1493179	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-cash assistance		
Purpose of grant	General support	

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		✓
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	✓	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		✓
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		✓
b	Any related organization?	5b		✓
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		✓
b	Any related organization?	6b		✓
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		✓
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		✓
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

	(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Howard E Charish	(i)	230,323	0	0	6,889	15,358	252,570	121,921
		(ii)	0	0	0	0	0	0	0
2	David Gad-Harf	(i)	150,444	0	0	7,000	18,526	175,970	75,066
		(ii)	0	0	0	0	0	0	0
3	Lawrence Cohen	(i)	153,668	0	0	0	7,886	161,554	69,792
		(ii)	0	0	0	0	0	0	0
4	David Moss	(i)	155,073	0	0	0	861	155,934	72,664
		(ii)	0	0	0	0	0	0	0
5		(i)							
		(ii)							
6		(i)							
		(ii)							
7		(i)							
		(ii)							
8		(i)							
		(ii)							
9		(i)							
		(ii)							
10		(i)							
		(ii)							
11		(i)							
		(ii)							
12		(i)							
		(ii)							
13		(i)							
		(ii)							
14		(i)							
		(ii)							
15		(i)							
		(ii)							
16		(i)							
		(ii)							

Part III Supplemental Information

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

Schedule J, Part I, Line 4 - 4(b) Howard Charish was a participant in a Rabbi Trust plan that was funded by the organization in the amount of 6,889 in calendar year 2010.

SCHEDULE K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part V.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	Colorado Educational & Cultural Facilities Authority	84-0896727	1964586R9	05/01/2007	6,500,000	Purchase and renovations of new office building		✓		✓		✓
B												
C												
D												

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	2,700,000			
2	Amount of bonds legally defeased	0			
3	Total proceeds of issue	3,800,000			
4	Gross proceeds in reserve funds	0			
5	Capitalized interest from proceeds	189,946			
6	Proceeds in refunding escrows	0			
7	Issuance costs from proceeds	145,532			
8	Credit enhancement from proceeds	0			
9	Working capital expenditures from proceeds	0			
10	Capital expenditures from proceeds	6,500,000			
11	Other spent proceeds	0			
12	Other unspent proceeds	0			
13	Year of substantial completion	2008			

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		✓						
15	Were the bonds issued as part of an advance refunding issue?		✓						
16	Has the final allocation of proceeds been made?	✓							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	✓							

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		✓						
b	Are there any research agreements that may result in private business use of bond-financed property?		✓						
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		✓						
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		5 %		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		9 %		%		%		%
6	Total of lines 4 and 5		14 %		%		%		%
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	✓							

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		✓						
2	Is the bond issue a variable rate issue?	✓							
3a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		✓						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
4a	Were gross proceeds invested in a GIC?		✓						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		✓						
6	Did the bond issue qualify for an exception to rebate?		✓						

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Schedule K, Part III, Line 2 - Sch K, Part III, Lines 2 and 4 -Lease arrangements exist with both 501(c)(3) and non-501(c)(3) organizations however property owned by JFNNJ is not considered "debt-financed property" as only a total of 14% of the property was leased and therefore more than 85 percent of the use of the property is devoted to the JFNNJ's exempt purposes.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	✓	78	791,972	Sales value
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( )				
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

				Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a			✓
b	If "Yes," describe the arrangement in Part II.				
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		✓	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		✓	
b	If "Yes," describe in Part II.				
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.				

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

Schedule M, Part I, Line 32b - Securities are sent directly by donors to pre-determined brokerage houses. The brokerage houses then sell the securities upon receipt.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

Form 990, Part VI, Section A, Line 2 - Howard Charish was the Executive Director of Jewish Federation of Northern New Jersey, a paid position. and also the Assistant Secretary to the Board of Trustees. David Bindelglass--Husband of Gale S. Bindelglass. Dr. Leonard Cole--Husband of Ruth Cole; Alan M. Gallatin, Es--Husband of Sharyn Gallatin, Esq. Arthur H. Joseph (deceased)--Husband of Joyce Joseph. Daniel Kirsch, Esq.--Husband of Laura Kirsch, Esq. Fred Lafer--Business relationship with Henry Taub. Gregory Meisel--Husband of Lisa Beth Meisel. Alan Scharfstein--Husband of Karen Scharfstein.

Form 990, Part VI, Section A, Line 4 - Jewish Federation of Northern New Jersey changed its name from UJA Federation of Northern New Jersey on March 3, 2011.

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

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

Form 990, Part VI, Section B, Line 15 - Under the auspices of the JFNNJ Board of Trustees, The Personnel Committee, which is made up of volunteers and assisted by lay people with expertise in the area of executive compensation, reviews surveys, studies all pertinent information from other Federations as a benchmark for the salaries and benefits of all key employees. Annual performance reviews are conducted with or without salary changes. All compensation changes are reviewed and authorized by the Personnel Committee. All changes are then approved by the JFNNJ Board of Trustees.

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

Form 990, Part XI, Line 5 - Unrealized Gains

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	JFNNJ Jewish Community Relations Council conducts programs on Israel Affairs, International Jewry, domestic concerns such as Bergen Reads, interfaith brotherhood, religious and racial tolerance, and Holocaust remebrances and awareness throughout the community Our Mitzvah Day is a community-wide day of volunteer activities that mobliize nearly 1,500 volunteers of all ages to work to better the community.	320,135	0	88,458
	JFNNJ's Jewish Educational Services operates a teacher resource center and provides expert consultation on school programs and other issues affecting day schools, regional schools and congregational schools. JES early childhood seminars, teacher recruitment and Jewish educational enrichment programs such as the Melton adult education program help enhance the quality of Jewish education in nothern New Jersey.	295,988	0	218,918
	JFNNJ's Israel Program Center serves as a living bridge between people of Israel and the Jewish community of northern New Jersey. This is achieved by providing Ulpan (Hebrew language) classes and other educational and cultural programs and events related to Israel such as our annual Israel Film Festival, the annual Parade to honor Israel and special celebrations such as the Israel at 60 Anniversary held in 2008	253,153	0	61,253
	Hillel of Northern New Jersey operates college campus programs at Fairleigh Dickinson University in Teaneck, Pamapo College, Bergen Community college and William Paterson University. In addition, the Keep in Touch program provides services for students who attend college out of our geographic area	133,440	0	15,878
	Berrie Fellows Leadership Porgram is an intensive two-year program focusing on leadership skills and Jewish learning including an overview of the history and current challenges facing the northern New Jersey community and exposure to leading philanthropists and thinkers. Graduates of the program are expected to intensify their commitment ot Jewish life and to assume significant leadership positions in the community and beyond. Two Berrie Fellows, for example, have created the Klene-Up Krewe which brings groups to New Orleans to help that community rebuild from the devistation caused by Hurricane Katrina and its aftermath. There have been ten trips to New Orleans to date	119,893	0	0
	The Kehillah Partnership Cooperative of JFNNJ is a program that began in February, 2010 and has become very successful in saving numerous nothern New Jersey Jewish community organizations including JFNNJ sustantial amounts of money by combining buying power to obtain lower costs on commodities and services. At June 2011 there are 95 participating organizations which have collectively saved approximately $972,000. The current offerings on which organizations are saving include: electricity, natural gas, office supplies, shipping, credit card processing fees, telecommunications, janitorial supplies, waste removal and a tax exempt bond program	106,238	0	0
	The JFNNJ Chaplaincy Commission provides chaplaincy services to area hospitals	70,363	0	51,229
Total:		**1,299,210**	**0**	**435,736**

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Jewish Federation of Northern New Jersey Inc

Employer identification number

20-1195592

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1) JEWISH ASSN FOR DEVELOPMENTAL DISABILTIES (22-2842847) 190 Moore St, Hackensack, NJ 07601	Sch R Part VII	NJ	501(c)(3)	7	N/A		✓
(2) JEWISH COMMUNITY HOUSING CORPORATION (23-7139963) 510 East 27th St, Paterson, NJ 07514	Sch R Part VII	NJ	501(c)(3)	9	Jewish Fed of No New Jersey	✓	
(3) BETH AND MARK METZGER FOUNDATION (22-2734107) 50 Eisenhower Dr, Paramus, NJ 07652	supporting org	NJ	501(c)(3)	Type I	N/A		✓
(4) ROSNER FAMILY FOUNDATION (20-4384158) 50 Eisenhower Dr, Paramus, NJ 07652	supporting org	NJ	501(c)(3)	Type I	N/A		✓
(5) SADINOFF FAMILY FOUNDATION (22-2789176) 50 Eisenhower Dr, Paramus, NJ 07652	supporting org	NJ	501(c)(3)	Type I	N/A		✓
(6) SEIDEN FAMILY FOUNDATION (22-2756922) 50 Eisenhower Dr, Paramus, NJ 07652	supporting org	NJ	501(c)(3)	Type I	N/A		✓
(7) (Continued on Schedule R, Part VII, Statement 1)							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
See Schedule R, Part VII, Statement 2			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V–UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Schedule R, Part II - (1)(a) Jewish Assn for Develop Disabilities (b) Primary activity is to provide services and support for disabled individuals; (2)(a)Jewish Comm Housing Corp (b) Primary activity is to provide low income housing for individuals below predetermined income levels.

20-1195592

Description of Identification of Related Tax-Exempt Organizations

Name and EIN	THE HELEN & JACK LUBLINER FAMILY FDN (90-0427853)
Address	50 Eisenhower Dr Paramus, NJ 07652
Primary activities	supporting org
State or foreign country	NJ
Exempt code section	501(c)(3)
Public charity status	Type I
Direct controlling entity	N/A
512(b)(13) controlled organization?	No

Name and EIN	THE M M KAPLAN FAMILY FOUNDATION (22-3410478)
Address	50 Eisenhower Dr Paramus, NJ 07652
Primary activities	supporting org
State or foreign country	NJ
Exempt code section	501(c)(3)
Public charity status	Type I
Direct controlling entity	N/A
512(b)(13) controlled organization?	No

Name and EIN	THE PERLMAN FAMILY FOUNDATION (22-3482032)
Address	50 Eisenhower Dr Paramus, NJ 07652
Primary activities	supporting org
State or foreign country	NJ
Exempt code section	501(c)(3)
Public charity status	Type I
Direct controlling entity	N/A
512(b)(13) controlled organization?	No

Name and EIN	THE UJA - 2 FOUNDATION INC (22-3484927)
Address	50 Eisenhower Dr Paramus, NJ 07652
Primary activities	supporting org
State or foreign country	NJ
Exempt code section	501(c)(3)
Public charity status	Type I
Direct controlling entity	N/A
512(b)(13) controlled organization?	No

Description of Covered Relationships and Transaction Thresholds

		Amount involved
Name	JEWISH COMMUNITY HOUSING CORPORATION	82,500
Transaction type	k	
Method of determining amount involved	cash payment of services rendered	
Name	BETH AND MARK METZGER FOUNDATION	401,000
Transaction type	c	
Method of determining amount involved	cash payment	

• If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box . . . . ▶ ☑

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	JEWISH FEDERATION OF NORTHERN NEW JERSEY INC	☑ 20-1195592
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	50 EISENHOWER DRIVE	☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	PARAMUS, NJ 07652	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	[redacted]	[redacted]
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of ▶ TAXPAYER

Telephone No. ▶ 201-820-3900 FAX No. ▶ 201-488-1507

• If the organization does not have an office or place of business in the United States, check this box . . . . . ▶ ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . . . ▶ ☐. If it is for part of the group, check this box . . . . ▶ ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until MAY 15, 20 12.

5 For calendar year _____, or other tax year beginning JULY 1, 20 10, and ending JUNE 30, 20 11.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension **Additional time is requested to acquire all information needed to file a complete and accurate return.**

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$ -
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$ -
c	**Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$ -

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ [signature] Title ▶ **Senior Accountant** Date ▶ 1/3/12