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Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning **JUL 1, 2010** and ending **JUN 30, 2011**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREENSBORO JEWISH FEDERATION Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 5509-C W. FRIENDLY AVENUE City or town, state or country, and ZIP + 4 GREENSBORO, NC 27410-4211 F Name and address of principal officer. MARILYN CHANDLER SAME AS C ABOVE	D Employer identification number 23-7107693 E Telephone number (336) 852-5433 G Gross receipts \$ 4,099,861. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: WWW.SHALOMGREENSBORO.ORG K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other L Year of formation: 1940 M State of legal domicile: NC		

Part I Summary

SCANNED FEB 10 2012

1 Briefly describe the organization's mission or most significant activities: TO PROMOTE THE WELFARE OF THE JEWISH PEOPLE, TO SERVE AS A SAFEGUARD OF THEIR RELIGIOUS FREEDOM		
2 Check this box <input type="checkbox"/> 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	55
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	55
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	19
6 Total number of volunteers (estimate if necessary)	6	1000
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-20,727.
b Net unrelated business taxable income from Form 990-T, line 34	7b	-20,727.
8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	7,497,631.	2,349,609.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	353,364.	479,806.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,118,543.	1,269,000.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-10,640.	-13,977.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,958,898.	4,084,438.
14 Benefits paid to or for members (Part IX, column (A), line 4)	2,194,806.	3,458,084.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a Professional fundraising fees (Part IX, column (A), line 11e)	624,863.	830,201.
b Total fundraising expenses (Part IX, column (D), line 25) 231,832.	0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	878,654.	802,640.
18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	3,698,323.	5,090,925.
19 Revenue less expenses - Subtract line 18 from line 12	5,260,575.	-1,006,487.
20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	22,961,298.	24,503,499.
22 Net assets or fund balances - Subtract line 21 from line 20	1,160,579.	1,123,229.
	21,800,719.	23,380,270.

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 MARILYN CHANDLER, EXECUTIVE DIRECTOR Type or print name and title	Date January 20, 2012	PTIN Check if self-employed <input type="checkbox"/>
Paid Preparer Use Only	Print/Type preparer's name STACY M. WEST Firm's name DAVENPORT, MARVIN, JOYCE & CO., LLP Firm's address 703 GREEN VALLEY ROAD, SUITE 201 GREENSBORO, NC 27408	Preparer's signature Date 1/20/12	Firm's EIN 336-275-9886 Phone no.

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

0119 19

Part III Statement of Program Service Accomplishments

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

☒ X**1** Briefly describe the organization's mission:

THE GREENSBORO JEWISH FEDERATION BUILDS COMMUNITY AMONG THE JEWISH PEOPLE OF GREENSBORO, ASSURING CONTINUITY FROM GENERATION TO GENERATION. RECOGNIZING THAT EACH JEW IS RESPONSIBLE, ONE FOR ANOTHER, THE FEDERATION PROMOTES THE WELFARE OF THE JEWISH PEOPLE IN OUR

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 \$ 225,442. including grants of \$ 18,919.) (Revenue \$ 21,347.)

JEWISH FAMILY SERVICES - OUR MISSION IS TO PROMOTE POSITIVE SOCIAL FUNCTIONING OF INDIVIDUALS AND FAMILIES AND SUPPORTS AND STRENGTHENS JEWISH FAMILY AND COMMUNITY LIFE. JEWISH FAMILY SERVICES, A CONSTITUENT AGENCY OF THE GREENSBORO JEWISH FEDERATION, IS ROOTED IN JEWISH VALUES AND IN THE COMMUNITY'S OBLIGATION TO SUPPORT BASIC HUMAN NEEDS AND ASSIST ITS MEMBERS IN THE JEWISH TRADITION OF HELPING PEOPLE TO HELP THEMSELVES.

PROGRAMS INCLUDE SENIOR PROGRAM INFORMATION AND REFERRALS, CLINICAL SERVICES, CASE MANAGEMENT, VOLUNTEER SERVICES, JFS EMPLOYMENT INITIATIVES, MITZVAH DAY, EMERGENCY CLIENT ASSISTANCE, CAMP SCHOLARSHIPS, JACKIE W AND LOTTIE K SAMET ISRAEL EXPERIENCE FUND, JEWISH EDUCATIONAL LOAN FUND, JEWISH FAMILY LIFE EDUCATION. JEWISH

4b (Code:) (Expenses \$ 957,824. including grants of \$ 824,295.) (Revenue \$ 134,484.)

GREENSBORO JEWISH FEDERATION PROGRAMMING. TO DEVELOP JEWISH EDUCATIONAL AND CULTURAL ACTIVITIES, PROMOTE AN UNDERSTANDING OF JEWISH CULTURE AND CONCERNS, FOSTER COOPERATION AND EFFECTIVENESS OF EXISTING JEWISH ORGANIZATIONS, DEVELOP HUMAN AND FINANCIAL RESOURCES TO MEET JEWISH NEEDS, AND BUILD A STRONG RELATIONSHIP WITH OUR COMMUNITY-AT-LARGE.

4c (Code:) (Expenses \$ 3,202,303. including grants of \$ 2,614,870.) (Revenue \$ 323,975.)

THE JEWISH FOUNDATION OF GREENSBORO IS A CONSTITUENT AGENCY OF THE GREENSBORO JEWISH FEDERATION. THE FOUNDATION IS A PRIMARY, TRUSTED AND EXPERT RESOURCE FOR PLANNED GIVING AND ENDOWMENTS. THE FOUNDATION ENGAGES, EDUCATES AND INSPIRES DONORS TO CREATE ONGOING RESOURCES FOR CHARITABLE, RELIGIOUS, COMMUNITY AND EDUCATIONAL NEEDS.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **4,385,569.**

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
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? <i>If "Yes," complete Schedule C, Part II</i>	4	X
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? <i>If "Yes," complete Schedule C, Part III</i>	5	X
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? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
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? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	X
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	

Form 990 (2010)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
24c 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	
24d 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? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
25b 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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
28c 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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33 X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38 X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 11		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 19		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See 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		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g 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		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		X
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
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? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
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		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2010)

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	55
b Enter the number of voting members included in line 1a, above, who are independent	1b	55
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

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. **MARILYN CHANDLER - 336-852-5433**
5509-C W. FRIENDLY AVENUE, GREENSBORO, NC 27410-4211

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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			
ADELMAN, JAMES PAST PRESIDENT-NON VOTING	1.00	X						0.	0.	0.
ALTMAN, DAVID BSDS REP TO FED BOARD	1.00	X						0.	0.	0.
BERKELHAMMER, MICHAEL PAST PRESIDENT	1.00	X						0.	0.	0.
BERNSTEIN, PEGGY VICE PRESIDENT	1.00	X						0.	0.	0.
BIGELMAN MICHELLE AT LARGE 2013	1.00	X						0.	0.	0.
BLUETHENTHAL, JOANNE PAST PRESIDENT-NON VOTING	1.00	X						0.	0.	0.
BOMBART, STEVE TREASURER	1.00	X						0.	0.	0.
BRENNER, FRANK PAST PRESIDENT	1.00	X						0.	0.	0.
BRENNER, NANCY PAST PRESIDENT	1.00	X						0.	0.	0.
BROD, ANDREW AT LARGE 2013	1.00	X						0.	0.	0.
COLCHAMIRO, HARVEY PAST PRESIDENT-NON VOTING	1.00	X						0.	0.	0.
CONE, ROBERT VICE CHAIR, MEN'S CAMPAIGN	1.00	X						0.	0.	0.
DANIELS, KEVIN AT LARGE 2013	1.00	X						0.	0.	0.
DICKSTEIN, SHERRY AT LARGE 2012	1.00	X						0.	0.	0.
DREW, GLEN AHA REP TO FED BOARD	1.00	X						0.	0.	0.
ELLSWEIG, KIM AT LARGE 2013	1.00	X						0.	0.	0.
FISCHER, GARY IMMEDIATE PAST PRESIDENT AND NOMINAT	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (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			
GAUSS, ARI NC HILLEL	1.00	X						0.	0.	0.
GLAZMAN, JON CHAIR, FINANCE	1.00	X						0.	0.	0.
GOLDSTEIN, MICAH AT LARGE 2013	1.00	X						0.	0.	0.
GOULD, KAREN AT LARGE 2013	1.00	X						0.	0.	0.
GREEN, RONALD PAST PRESIDENT-NON VOTING	1.00	X						0.	0.	0.
GRONER, JUDY BSDS	1.00	X						0.	0.	0.
GUTTERMAN, DAVID BD REP TO FED BOARD	1.00	X						0.	0.	0.
GUTTERMAN, BERNARD PAST PRESIDENT	1.00	X						0.	0.	0.
GUTTMAN, RABBI FRED TE RABBI	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								202,055.	0.	9,309.
d Total (add lines 1b and 1c)								202,055.	0.	9,309.

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 **1**

- 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

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(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 0		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2010)

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
HAVIVI, RABBI ELIEZER BD RABBI	1.00	X						0.	0.	0.
HYMAN, ANITA BBYO REP TO FED BOARD	1.00	X						0.	0.	0.
ISAACSON, MARC VICE PRESIDENT	1.00	X						0.	0.	0.
JACOBS, SARA HADASSAH REP TO FED BOARD	1.00	X						0.	0.	0.
JACOBSON, ALBERT PAST PRESIDENT	1.00	X						0.	0.	0.
KAHN, BEN AT LARGE 2012	1.00	X						0.	0.	0.
KAISER, JENNY WOMEN'S PHILANTHROPY DIVISION PRESID	1.00	X						0.	0.	0.
KAPLAN, LEONARD J. PRESIDENTIAL APPOINTMENT	1.00	X						0.	0.	0.
KAPLAN, RANDALL JDC	1.00	X						0.	0.	0.
KOREN, RABBI ANDREW TE RABBI	1.00	X						0.	0.	0.
LAVIETES, ROBERT PAST PRESIDENT-NON VOTING	1.00	X						0.	0.	0.
LEBAUER, GAIL JEWISH FOUNDATION OF GSO.	1.00	X						0.	0.	0.
LEBAUER, JOSLIN PAST PRESIDENT-NON VOTING	1.00	X						0.	0.	0.
LEVINSON, CATHY AT LARGE 2012	1.00	X						0.	0.	0.
LUTINS, NEIL MEN'S CAMPAIGN CHAIR	1.00	X						0.	0.	0.
MANNING, PATSY B'NAI ISRAEL REP	1.00	X						0.	0.	0.
MANNING, KATHY PAST PRESIDENT/JFNA BOARD	1.00	X						0.	0.	0.
MEDOFF, JEFF PAST PRESIDENT	1.00	X						0.	0.	0.
MEZER, LOIS JFS CHAIR	1.00	X						0.	0.	0.
MILLER, DEBBY JDC	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MILSTEIN, RONALD TE REP TO FED BOARD	1.00	X						0.	0.	0.
NEHMAN, SUSAN AT LARGE 2012	1.00	X						0.	0.	0.
PINSKER, JERROLD PRESIDENTIAL APPOINTMENTS	1.00	X						0.	0.	0.
PINSKER, SUSAN SECRETARY	1.00	X						0.	0.	0.
ROBINSON, SUSAN PRESIDENT	1.00	X						0.	0.	0.
ROSEN, KEITH VICE PRESIDENT	1.00	X						0.	0.	0.
ROSEN, ERIN NC HILLEL REP TO FED BOARD	1.00	X						0.	0.	0.
SAPERSTEIN, SARA LEE PAST PRESIDENT-VOTING	1.00	X						0.	0.	0.
SEGAL, PHILIP AT LARGE 2012	1.00	X						0.	0.	0.
SHAVITZ, STEVE PRESIDENT-ELECT	1.00	X						0.	0.	0.
SIMMONS, SUSAN VICE PRESIDENT	1.00	X						0.	0.	0.
SLOAN, THOMAS PAST PRESIDENT	1.00	X						0.	0.	0.
STRASSER, AARON IMMEDIATE PAST CAMPAIGN CHAIR	1.00	X						0.	0.	0.
THURM, TAMMI IMMEDIATE PAST CAMPAIGN CHAIR	1.00	X						0.	0.	0.
TUCK, LESLYE WOMEN'S CAMPAIGN CHAIR	1.00	X						0.	0.	0.
WOLF, DANIEL AT LARGE 2012 & FED REP TO BSDS	1.00	X						0.	0.	0.
CHANDLER, MARILYN EXECUTIVE DIRECTOR	40.00			X				167,374.	0.	9,231.
VALENTINE, TRACY DIR FINANCE AND HR	40.00			X				34,681.	0.	78.
Total to Part VII, Section A, line 1c								202,055.		9,309.

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,349,609.				
	g Noncash contributions included in lines 1a-1f \$		886,702.				
	h Total. Add lines 1a-1f		2,349,609.				
Program Service Revenue	2 a MANAGEMENT FEE INCOME	Business Code	900099	323,975.	323,975.		
	b PARTICIPANT FEES		900099	155,831.	155,831.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			479,806.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			610,442.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross Rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)				6,750.			
d Net rental income or (loss)				6,750.			6,750.
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses							
c Gain or (loss)				639,153.	15,423.		
d Net gain or (loss)				19,405.			
				658,558.			658,558.
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a					
b Less: direct expenses		b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19		a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a 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				
11 a NEWSPAPER REVENUES-NET		323100	-20,727.		-20,727.		
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			-20,727.				
12 Total revenue. See instructions.			4,084,438.	479,806.	-20,727.	127,5750.	

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	3,450,215.	3,450,215.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	7,869.	7,869.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	243,011.	71,518.	113,783.	57,710.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	491,417.	315,194.	99,201.	77,022.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	42,607.	24,852.	12,356.	5,399.
10 Payroll taxes	53,166.	27,206.	15,418.	10,542.
11 Fees for services (non-employees):				
a Management				
b Legal	2,331.	1,212.	676.	443.
c Accounting	24,529.	12,657.	7,113.	4,759.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	310,655.	220,565.	90,090.	
g Other	1,399.	699.	406.	294.
12 Advertising and promotion				
13 Office expenses	17,787.	11,452.	5,158.	1,177.
14 Information technology	21,269.	11,098.	6,168.	4,003.
15 Royalties				
16 Occupancy	15,890.	8,263.	4,608.	3,019.
17 Travel	91,552.	62,767.	26,550.	2,235.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	54,092.	23,816.	15,687.	14,589.
20 Interest	2,253.	1,172.	653.	428.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	42,516.	23,411.	12,330.	6,775.
23 Insurance	11,516.	6,209.	3,340.	1,967.
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 MISCELLANEOUS EXPENSE	82,908.	43,211.	28,365.	11,332.
b BAD DEBT	47,854.	33,976.	13,878.	
c REPAIRS AND MAINTENANCE	21,345.	8,938.	6,190.	6,217.
d TELEPHONE	15,111.	8,530.	4,382.	2,199.
e CAMPAIGN EVENTS	14,902.			14,902.
f All other expenses	24,731.	10,739.	7,172.	6,820.
25 Total functional expenses. Add lines 1 through 24f	5,090,925.	4,385,569.	473,524.	231,832.
26 Joint costs. Check here <input type="checkbox"/> 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	100.	1	100.
	2 Savings and temporary cash investments	1,656,473.	2	1,332,966.
	3 Pledges and grants receivable, net	1,085,171.	3	1,126,577.
	4 Accounts receivable, net	246,904.	4	231,370.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), 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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,879,479.		
	b Less: accumulated depreciation	10b 619,252.	10c	1,260,227.
	11 Investments - publicly traded securities	18,728,208.	11	20,552,259.
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	22,961,298.	16	24,503,499.	
Liabilities	17 Accounts payable and accrued expenses	717,246.	17	699,896.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	443,333.	23	423,333.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,160,579.	26	1,123,229.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	16,630,816.	27	18,210,367.
	28 Temporarily restricted net assets	4,873,780.	28	4,873,780.
	29 Permanently restricted net assets	296,123.	29	296,123.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	21,800,719.	33	23,380,270.
	34 Total liabilities and net assets/fund balances	22,961,298.	34	24,503,499.

Form 990 (2010)

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	4,084,438.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,090,925.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,006,487.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21,800,719.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,586,038.
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	23,380,270.

Part XII Financial Statements and Reporting

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

☒

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?

b Were the organization's financial statements audited by an independent accountant?

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.

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?

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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2010)

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

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

[illegible]**Total**

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

Schedule A (Form 990 or 990-EZ) 2010

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.")	5986218.	1371310.	2474872.	7497632.	2349609.	19679641.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	5986218.	1371310.	2474872.	7497632.	2349609.	19679641.
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)						7968520.
6 Public support. Subtract line 5 from line 4						11711121.

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	5986218.	1371310.	2474872.	7497632.	2349609.	19679641.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	610,135.	323,456.	515,434.	605,562.	610,442.	2665029.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	-11,603.	-7,380.	-6,590.	-15,638.	-20,727.	-61,938.
11 Total support. Add lines 7 through 10						22282732.
12 Gross receipts from related activities, etc. (see instructions)					12	1,830,176.
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	52.56	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	57.11	%
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 <input checked="" type="checkbox"/>			
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 <input type="checkbox"/>			
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 <input type="checkbox"/>			
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 <input type="checkbox"/>			
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 <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2010

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 <input type="checkbox"/>						

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).

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

NEWSPAPER ADVERTISING INCOME (NET OF EXPENSE)

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

2010Open to Public
Inspection

Name of the organization

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

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	74	
2 Aggregate contributions to (during year)	988,050.	
3 Aggregate grants from (during year)	3,291,146.	
4 Aggregate value at end of year	12,110,023.	

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)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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.

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

	Amount
1c	21,932,743.
1d	6,389,588.
1e	4,612,092.
1f	23,710,239.

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	7,112,389.	6,558,847.	8,011,716.		
b Contributions	276,921.	139,280.	59,106.		
c Net investment earnings, gains, and losses	1,465,150.	787,761.	-1,095,374.		
d Grants or scholarships	338,615.	7,205.	7,549.		
e Other expenditures for facilities and programs	16,702.	292,789.	368,642.		
f Administrative expenses	14,259.	73,505.	40,410.		
g End of year balance	8,484,884.	7,112,389.	6,558,847.		

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

- a Board designated or quasi-endowment ☒ 96.00 %
 b Permanent endowment ☒ 4.00 %
 c Term endowment ☒ .00 %

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

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)		<input checked="" type="checkbox"/>
3b		

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		150,492.		150,492.
b Buildings		1,323,362.	249,929.	1,073,433.
c Leasehold improvements				
d Equipment		405,625.	369,323.	36,302.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,260,227.

Schedule D (Form 990) 2010

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. (Col (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. (Col (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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

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)

032053
12-20-10

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	4,084,438.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,090,925.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-1,006,487.
4	Net unrealized gains (losses) on investments	4	2,586,038.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	2,586,038.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,579,551.

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	6,506,478.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,586,038.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	37,646.
e	Add lines 2a through 2d	2e	2,623,684.
3	Subtract line 2e from line 1	3	3,882,794.
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	
b	Other (Describe in Part XIV.)	4b	201,644.
c	Add lines 4a and 4b	4c	201,644.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,084,438.

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

1	Total expenses and losses per audited financial statements	1	4,926,927.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	37,646.
e	Add lines 2a through 2d	2e	37,646.
3	Subtract line 2e from line 1	3	4,889,281.
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	
b	Other (Describe in Part XIV.)	4b	201,644.
c	Add lines 4a and 4b	4c	201,644.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,090,925.

Part XIV Supplemental Information

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

PART IV, LINE 1B: THE JEWISH FOUNDATION OF GREENSBORO, A DIVISION OF THE GREENSBORO JEWISH FEDERATION, MANAGES THE ENDOWMENTS AND CHARITABLE FUNDS FOR JEWISH AGENCIES THROUGHOUT NORTH CAROLINA AND THE SOUTHEASTERN UNITED STATES. THE FOUNDATION ADVANCES PHILANTHROPY AT THESE ORGANIZATIONS THROUGH EDUCATION AND BY PROVIDING INVESTMENT MANAGEMENT EXPERTISE. ALTHOUGH THE FOUNDATION SERVES IN A CUSTODIAL CAPACITY OVER THESE ASSETS, THEY ARE NOT GREENSBORO JEWISH FEDERATION FUNDS. THUS, THESE ASSETS DO NOT APPEAR ON THE GREENSBORO JEWISH FEDERATION FINANCIAL STATEMENT OR

Part XIV Supplemental Information (continued)

FEDERAL FORM 990.

PART V, LINE 4: TO FUND OPERATIONS AND PROGRAMS OF THE GREENSBORO
FEDERATION.

PART X, LINE 2: AS OF JUNE 30, 2011, MANAGEMENT BELIEVES THERE ARE NO
UNCERTAIN TAX POSITIONS.

AS OF JUNE 30, 2011 AND INCLUDING THE PREVIOUS THREE YEARS CONSIDERING
EXTENSIONS, THE FEDERATION'S INCOME TAX RETURNS ARE OPEN AND SUBJECT TO
EXAMINATION BY TAX AUTHORITIES WITH RELEVANT JURISDICTION. SHOULD SUCH AN
EXAMINATION TAKE PLACE, MANAGEMENT DOES NOT ANTICIPATE ANY SIGNIFICANT
ISSUES RELATED TO THE OPEN YEARS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

NEWSPAPER EXPENSES INCLUDED IN INCOME ON 990 37,646.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INCOME NETTED WITH EXPENSES ON AUDITED FINANCIAL STATEMENTS 201,644.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

NEWSPAPER EXPENSE INCLUDED IN INCOME ON 990 37,646.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

INCOME NETTED WITH EXPENSES ON AUDITED FINANCIAL STATEMENTS 201,644.

SCHEDULE D PART XII AND XIII, LINES 2D AND 4B - EXPENSES RELATED DIRECTLY
TO ADVERTISING ARE NETTED AGAINST REVENUE FOR NEXT ADVERTISING LOSS

Part XIV Supplemental Information (continued)

RECORDED ON 990 PART VIII. IN ADDITION, OTHER EXPENSES HAVE BEEN NETTED
AGAINST REVENUE FOR CONSISTENCY PURPOSES AND TO BEST REFLECT THE CHANGE IN
NET ASSETS.

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

GREENSBORO JEWISH FEDERATION

Employer identification number
23-7107693

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
B'NAI SHALOM DAY SCHOOL 804 WINVIEW DR #A GREENSBORO, NC 27410	56-0952340	501(C)(3)	219,700.	0.			PROVIDE ASSISTANCE FOR JEWISH EDUCATION
NC HILLEL FOUNDATION 4506 KENBRIDGE DR GREENSBORO, NC 27410	56-6094521	501(C)(3)	45,000.	0.			ASSISTANCE FOR OPERATIONS OF HILLEL FOUNDATION
JEWISH FEDERATIONS OF NORTH AMERICA - ISRAEL CRISIS FUND - 25 BROADWAY ST, SUITE 1700 - NEW YORK, NY 10004	13-1624240	501(C)(3)	501,401.	0.			ASSISTANCE TO SUPPORT ISRAEL EMERGENCY CAMPAIGN
AMERICAN HEBREW ACADEMY 4334 HOBBS RD GREENSBORO, NC 27410	56-1985976	501(C)(3)	20,800.	0.			ASSISTANCE TO SUPPORT LOCAL HEBREW ACADEMY FOR FIELD TRIPS AND OTHER EDUCATION OPPORTUNITIES.
CAMP JUDEA 2700 NE EXPRESSWAY, C-500 ATLANTA, GA 30345	58-6014651	501(C)(3)	18,300.	0.			ASSISTANCE TO PROVIDE SUPPORT FOR CAMPS
DISBURSEMENTS/GRANTS DISTRIBUTED BY GREENSBORO FEDERATION - 5509-C W FRIENDLY AVENUE - GREENSBORO, NC 27410		501(C)(3)	2,592,616.	0.			ASSISTANCE PROVIDED TO QUALIFYING CHARITABLE ORGANIZATIONS

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

301.

3 Enter total number of other organizations

0.

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

Schedule I (Form 990) (2010)

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
JEWISH FAMILY SERVICES - CLIENT ASSISTANCE	47	5,094.	2,775.	FAIR MARKET VALUE	PAYMENT OF LIVING EXPENSES IN EMERGENCY SITUATIONS DUE TO EXTREME FINANCIAL HARDSHIP

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: HOW GRANTS ARE MONITORED - 501(C)(3) STATUS IS
CONFIRMED FOR ALL GRANTEES ON AN ANNUAL BASIS. ALL GRANTS REQUIRE BOARD
APPROVAL PRIOR TO DISTRIBUTION.

**SCHEDULE J
(Form 990)**

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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?

b Any related organization?

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?

b Any related organization?

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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2010

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 CHANDLER, MARILYN	(i) 167,374.	(ii) 0.	(iii) 0.	0.	9,231.	176,605.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2	(i)						
	(ii)						
3	(i)						
	(ii)						
4	(i)						
	(ii)						
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)						

Schedule J (Form 990) 2010

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2010

Open to Public
Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

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	X	60	883,927.	SELLING PRICE
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 ► (MISCELLANEOUS)	X	50	2,775.	FAIR MARKET VALUE
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

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

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? ..

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

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

Yes No

30a		X
31	X	
32a	X	

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

Schedule M (Form 990) (2010)

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, LINE 32B: DONATIONS OF PUBLICLY TRADED SECURITIES ARE
RECEIVED AND SOLD BY A THIRD PARTY BROKER

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

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND CIVIL RIGHTS, AND TO RESPOND TO THEIR PHILANTHROPIC, CULTURAL, AND
EDUCATIONAL NEEDS LOCALLY, NATIONALLY, AND INTERNATIONALLY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITY, IN ISRAEL AND WORLDWIDE. THE FEDERATION ACCOMPLISHES ITS
MISSION BY:

○DEVELOPING JEWISH EDUCATIONAL AND CULTURAL ACTIVITIES.

○PROMOTING AN UNDERSTANDING OF JEWISH CULTURE AND CONCERNS.

○FOSTERING COOPERATION AND EFFECTIVENESS OF EXISTING JEWISH
ORGANIZATIONS.

○DEVELOPING HUMAN AND FINANCIAL RESOURCES TO MEET JEWISH NEEDS.

○BUILDING A STRONG RELATIONSHIP WITH OUR COMMUNITY-AT-LARGE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

FAMILY SERVICES PROVIDES HOLIDAY LUNCHEONS TO APPROXIMATELY 140
INDIVIDUALS, 100 GIFTS AT EACH HOLIDAY (CHANUKAH, ROSH HASHANAH, PURIM &
PASSOVER), AN EXERCISE PROGRAM AVERAGING 13 PARTICIPANTS PER CLASS, VAN
TRANSPORTATION, 28 FRIENDLY VISITORS, AND YIDDISH CLUB WITH 6 REGULARLY
ATTENDING MEMBERS. CONGREGATIONAL NURSE CAN ASSIST WITH EDUCATION
REGARDING HEALTH AND WELLNESS ISSUES AND SEES ABOUT 200 PEOPLE PER
YEAR. 890 REFERRALS WERE MADE DURING FISCAL 2010. GOODWILL VOUCHERS
WERE GIVEN TO 19 PEOPLE, THE FOOD PANTRY WAS USED BY 61 INDIVIDUALS,
AND FOOD VOUCHERS WERE PROVIDED TO 16 FAMILIES. ASSISTANCE PROVIDED TO
47 FAMILIES.

Name of the organization

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

FORM 990, PART VI, SECTION A, LINE 2: MANY OF THE BOARD OF TRUSTEES HAVE BUSINESS RELATIONSHIPS WITH OTHER TRUSTEES DUE TO THE SMALL COMMUNITY AND THE PROLIFERATION OF TRUSTEES WHO ARE IN BUSINESS WITHIN THE COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 6: ANY PERSON OF THE JEWISH FAITH WHO IS EIGHTEEN (18) YEARS OF AGE OR OLDER, AS WELL AS ANY MEMBER OF SUCH PERSON'S IMMEDIATE FAMILY AND/OR HOUSEHOLD WHO IS EIGHTEEN (18) YEARS OF AGE OR OLDER, SHALL BE ELIGIBLE TO BECOME A MEMBER OF THE CORPORATION. MEMBERSHIP SHALL BE EFFECTIVE UPON THE PAYMENT OF A CONTRIBUTION TO THE CORPORATION AND SHALL BE EFFECTIVE FOR THAT FISCAL YEAR IN WHICH SUCH CONTRIBUTION WAS MADE AND THE FISCAL YEAR IMMEDIATELY FOLLOWING.

FORM 990, PART VI, SECTION A, LINE 7A: THE ANNUAL MEETING OF THE MEMBERS OF THE CORPORATION SHALL BE HELD EACH YEAR AT SUCH TIME IN THE MONTH OF APRIL, MAY OR JUNE AS THE PRESIDENT OF THE CORPORATION MAY DESIGNATE. SUCH MEETING SHALL BE HELD FOR THE PURPOSE OF ELECTING MEMBERS OF THE BOARD OF TRUSTEES AND OFFICERS, RECEIVING REPORTS OF THE PRESIDENT, AND THE TRANSACTING OF ANY AND ALL MATTERS PRESENTED AT SUCH TIME.

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE IS ENTRUSTED BY THE BOARD OF DIRECTORS WITH THE RESPONSIBILITY OF REVIEWING THE ORGANIZATION'S 990 PRIOR TO FILING. THE FINANCE COMMITTEE REPORTS TO THE BOARD OF TRUSTEES ON ANY RECOMMENDED CHANGES AND THE STATUS OF THE RETURN. AS REQUIRED IN THE BY-LAWS, THE GREENSBORO JEWISH FEDERATION PRESIDENT AND TREASURER ARE MANDATORY MEMBERS OF THE FINANCE COMMITTEE, ALONG WITH OTHER ORGANIZATION MEMBERS POSSESSING RELATED PROFESSIONAL EXPERTISE.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS

032212
01-24-11

Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization

GREENSBORO JEWISH FEDERATION

Employer identification number

23-7107693

DISTRIBUTED ANNUALLY AND EACH TRUSTEE, OFFICER AND COMMITTEE MEMBER WILL SIGN A STATEMENT DISCLOSING ANY CONFLICT OF INTEREST, AS WELL AS ACKNOWLEDGEMENT THAT HE/SHE HAS READ, UNDERSTANDS AND AGREES TO COMPLY WITH THE POLICY. ANY CONFLICTS OF INTEREST ARE ADDRESSED AND VOTED ON WHEN NEEDED.

FORM 990, PART VI, SECTION B, LINE 15: IN DETERMINING COMPENSATION, THE FEDERATION OBTAINS COMPARABILITY DATA, THEN REQUIRES REVIEW AND APPROVAL OF COMPENSATION BY THE PRESIDENT AND TREASURER, AS WELL AS THE CHAIR OF THE PERSONNEL COMMITTEE AT A MINIMUM.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AND AT THE DISCRETION OF THE EXECUTIVE DIRECTOR

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 2,586,038.

FORM 990 PART XII, LINE 2C

OVERSIGHT OF AUDIT AND SELECTION OF ACCOUNTANT

THE FINANCE COMMITTEE IS ENTRUSTED BY THE BOARD TO PROVIDE OVERSIGHT OVER THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT CHANGED IN THE CURRENT TAX YEAR.

▶ 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.

Open to Public Inspection

Employer identification number
23-7107693

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

[illegible]

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.)

[illegible]

Schedule R (Form 990) 2010

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

[illegible]

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.)

[illegible]

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.**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?

	Yes No	
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
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VII Supplemental Information

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

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization GREENSBORO JEWISH FEDERATION	Employer identification number 23-7107693
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. 5509-C W. FRIENDLY AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. GREENSBORO, NC 27410-4211	

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

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	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

MARILYN CHANDLER

- The books are in the care of ► **5509-C W. FRIENDLY AVENUE - GREENSBORO, NC 27410-4211**
Telephone No. ► **336-852-5433** FAX No. ► **336-852-4346**

- 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.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☐ calendar year _____ or
► ☒ tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a 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	3a	\$	0.
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.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2011)