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DLN: 93493136044792

Department of the Treasury

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)

2010

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 A For the 2010 D Employer identification number B Check if applicable Jewish Federation of Metropolitan Chicago Address change 36-2167761 Doing Business As Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (312)444-2814 30 South Wells No 4049 Terminated **G** Gross receipts \$ 94,216,459 City or town, state or country, and ZIP \pm 4 Chicago, IL 60606 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes Steven B Nasatır 30 South Wells No 4049 H(b) Are all affiliates included? Chicago, IL 60606 If "No," attach a list (see instructions) H(c) Group exemption number ▶ Tax-exempt status **▽** 501(c)(3) **┌** 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Website: ► www JUF ord K Form of organization
✓ Corporation
☐ Trust
☐ Association
☐ Other ► L Year of formation 1900 M State of legal domicile IL Summary Part I Briefly describe the organization's mission or most significant activities Federation is the Chicago Jewish community's central address, supporting broad humanitarian services Activities & Governance 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 85 Number of independent voting members of the governing body (Part VI, line 1b) . 4 83 5 0 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 10,000 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -2,178,861 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b -2,223,341 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 63,270,556 71,986,630 Rayenue Program service revenue (Part VIII, line 2g) . 6,328,662 6,384,235 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 2,693,183 13,472,826 2,035,237 2,372,768 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 74,327,638 94,216,459 13 90,643,199 88,113,119 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines Expenses 3,695,899 3,829,001 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 2,042,909 2,010,316 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 96,382,007 93,952,436 19 Revenue less expenses Subtract line 18 from line 12 . -22,054,369 264,023 Net Assets or Fund Balances **Beginning of Current End of Year** Year 20 465,864,806 493,283,759 Total assets (Part X, line 16) . Total liabilities (Part X, line 26) . 99,060,830 83,015,933 22 366,803,976 410,267,826 Net assets or fund balances Subtract line 21 from line 20 Signature Block Part II 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. 2012-05-15 Signature of officer Sign Here James A Pinkston Vice President, Accounting Type or print name and title Print/Type preparer's name Check if self-Preparer's signature PTIN Date

David Faje

CHICAGO, IL 60606

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Firm's address 🕨 1 S WACKER DRIVE STE 800

Firm's name | MCGLADREY LLP

Paid

Preparer

Use Only

employed ▶ [

Phone no 🕨 (312) 634-

Γ

Fım's EIN

▽ Yes

Par	HII	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	F
	D 6		,,
1		efly describe the organization's mission	6 t h hall b acks are a
		ation funds a network of nearly 70 agencies and programs that care for people at every stage of life, regardless In provides for the community's most vulnerable members, including children, the poor, elderly and people with	
	acion	The vives for the community of most valuerable members, merading emarch, the poor, erachy and people with	arsasincies
2		the organization undertake any significant program services during the year which were not listed on prior Form 990 or 990-EZ?	es 🔽 No
	•	'es," describe these new services on Schedule O	J. 140
3		the organization cease conducting, or make significant changes in how it conducts, any program	
3			es 🗸 No
	If "Ye	es," describe these changes on Schedule O	
4	Desc	cribe the exempt purpose achievements for each of the organization's three largest program services by exper	ises
	Secti	tion $501(c)(3)$ and $501(c)(4)$ organizations and section $4947(a)(1)$ trusts are required to report the amount of	
	alloca	cations to others, the total expenses, and revenue, if any, for each program service reported	
	/Cd	ode) (Expenses \$ 81,733,352 including grants of \$ 80,623,382) (Revenue \$	
4a	(Cod	ode) (Expenses \$ 81,733,352 including grants of \$ 80,623,382) (Revenue \$ e Federation's largest endeavor is to allocate funds to a network of nearly 70 agencies in the Chicago area that provide assistance to 30)
	faiths	hs, including hot meals and groceries, utility and rent assistance, prescriptions and medical care for impoverished families, job training	and placement for people
		o are out of work, therapeutic school and specialized care for children with disabilities, support services for Holocaust survivors, assisted neimer's care and transportation for seniors, respite services for caregivers of frail seniors and people with disabilities, counseling, preve	
		vices for troubled teens, and an entire continuum of prevention and therapeutic services for individuals and families in crisis	
4b	(Cod	ode) (Expenses \$ 6,384,235 including grants of \$ 5,850,143) (Revenue \$	6,384,235)
		igee Social Service Program - The Jewish Federation of Metropolitan Chicago administers all refugee social services on behalf of the st igee Social Service Consortium is comprised of 11 direct service agencies committed to providing quality refugee social services including	
	Langi	iguage Training, Cultural Adjustment, Mental Health, Senior Services and School Adjustment Services for Kindergarten to 12th grade to	refugees from around the
		rld Contracts are funded through a combination of federal and state resources. The Federation's program responsibilities have evolved ency monitoring, program coordination and planning, development of transcriptions, including RFP development and management of t	
	techr	hnical assistance, financial management, and data collection and reporting. In addition to Refugee Social Services, JFMC also serves as	the fiscal agent for the
	кети	ugee and Immigrant Citizenship Initiative that provides citizenship outreach, instruction, and application assistance to newcomers to the	United States of America
	(6.4		
4 c	(Cod)
	provi	els of Illinois - Federation supports a vast array of Jewish activities for students at colleges, universities and professional schools in Illino vides opportunities for Jewish students to explore and celebrate their Jewish identity at 17 different college campuses in Illinois, as well	l as through Hillel Regional
		grams. Hillel adds value - and Jewish values - to the lives of Jewish college students and the entire campus community. Hillel seeks to Icoming and inclusive environment for Jewish college students, an environment where students are encouraged to grow intellectually, s	
	., ., .	an environment made statement of serior consequence an environment made statement are encouraged to grow intellectually, a	
	Oth	her program services (Describe in Schedule O)	
Т		xpenses \$ including grants of \$) (Revenue \$)
		tal program service expenses▶\$ 89 927 415	

Part TV	Checklist o	of Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? $^{f z}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part V^{\bullet}	10	Yes	
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
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 U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
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 U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 \bigcirc Yes \checkmark No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable							
	1a 247							
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	Yes					
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							
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						
_								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes					
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes					
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	4a	Yes					
h	account)?		163					
_	If "Yes," enter the name of the foreign country LS See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
	To be most detailed for mining requirements for reminist rise 22 27, reported riversign sum and rimanolar rice cante							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
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		Νo				
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).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo				
h	services provided to the payor?							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b						
	file Form 8282?	7c		No				
d	d If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο				
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	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		No				
9	Sponsoring organizations maintaining donor advised funds.							
	Did the organization make any taxable distributions under section 4966?	9a		No				
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N o				
10	Section 501(c)(7) organizations. Enter Introduce for and control contributions included on Port VIII. line 12							
	Initiation fees and capital contributions included on Part VIII, line 12 10a							
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources							
	against amounts due or received from them)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the							
	year 12b							
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
а	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						
L	Enter the amount of recognize the organization is required to maintain by the atotal							
O	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							
С	Enter the amount of reserves on hand							
	13c							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		N o				
n	THE TAKE THE TRANSPORT A FORM A ZILLED REPORT TRACE DAVIMENTS Z. IT "NO." PROVIDE AN EXPLANATION IN SCHEDULE ()	. 14h						

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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	stion in this Part VI	
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Se	ection A. Governing Body and Management							
			Yes	No				
	Enterphysical Control of Control of the Control of							
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	Enter the number of voting members included in line 1a, above, who are independent							
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	Yes					
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		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was							
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No				
6	Does the organization have members or stockholders?	6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes					
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		N o				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
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		No				
	ection B. Policies (This Section B requests information about policies not required by the Internal							
Re	evenue Code.)							
10-	Does the average transfer have local chapters by makes or affiliates?	10a	Yes	No No				
	10a Does the organization have local chapters, branches, or affiliates?							
	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?							
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
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	Yes					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes					
13	Does the organization have a written whistleblower policy?	13	Yes					
14	Does the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
ь	Other officers or key employees of the organization	15b	Yes					
	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		No				
b	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?							
Se	ection C. Disclosure	16b						
17	List the States with which a copy of this Form 990 is required to be filed IL							
18	Section 6104 requires an organization to make its Form 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							

- 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. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization James A Pinkston
 30 South Wells Suite 4049

Chicago,IL 60606 (312)357-4790

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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 organ	nization nor any r	sate	d any current office	er, director, or trust	ee								
(A) Name and Title	(B) Average hours		(C) Position (check all that apply)			Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
See Additional Data Table													

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

			_											
	(A) Name and Title	(B) Average hours per		that a					Repo compe	(D) ortable ensation m the	ition compensation			ated fother
		week (describe hours for related organizations in Schedule	Individual trustee or director	Institutional Truste	Officei	Key employee	Highest compensat employee	Former	organız	ation (W- 9-MISC)	organizations (W- 2/1099- MISC)		compen: from rganizat relat organiza	the ion and ed
		0)	•••	ă			<u> 2</u>							
See A	dditional Data Table						_							
							_					_		
				<u> </u>										
1b	Sub-Total						٠	►						
С	Total from continuation sheets	to Part VII, Sec	tion A				۲							
d	Total (add lines 1b and 1c) .							*		1,016,606	3,251,06	7	1,153,138	
2	Total number of individuals (inc \$100,000 in reportable comper	-				ted	above) who	receive	d more tha	n			
_													Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sc.	•				еу е •	mploy •	ee, o	r highest	compens:	eted employee	3		No
4	For any individual listed on line organization and related organization													1
5	Individual	receive or accri	ie comr	• nensa	• ition	fror	n anv	• unrel	lated ord	· · ·	r individual for	4	Yes	
	services rendered to the organiz										•	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from	•		ındep	ende	ento	contra	ctors	that rec	eived more	e than			
	Na	(A) me and business ad	dress							Descr	(B) iption of services		(C Comper	
1 Sou Chica	drey & Pullen LLP th Wacker Dr 800 go, IL 60606									Audıt				507,795
318 V New	is Associates V 39th Street 5th Floor York, NY 10018									Consulting				390,164
1 Sou	McGladrey th Wacker Dr 800 go, IL 60606									Tax Preparat	ion			170,050
												_		
2	Total number of independent cont	ractors (includii	ng but n	ot lin	nited	to	those	liste	d above)	who receiv	ed more than			

\$100,000 in compensation from the organization $\blacktriangleright 3$

	1a b c d e '	Statement of Reven	ue		(A) Total revenue	or exempt	(C) Unrelated business revenue	
commons, giffs, grants and other similar amounts	b c d e '		_	1,275,357		revenue		tax under sections 512, 513, or 514
contributions, gifts, gr.	c d e	Membership dues	1a					
and other similar a	d l							
and other simila	e '	Fundraising events						
and other sir		Related organizations		32,021,047				
and othe		Government grants (contributions)		1,771,850				
ando	T '	All other contributions, gifts, grants similar amounts not included above	s, and 1f e	36,918,376				
5 =	g	Noncash contributions included in l	ines 1a-1f \$	11,604,057				
	h '	Total. Add lines 1a-1f	<u> </u>		71,986,630			
<u>a</u>	_			Business Code				
went.	2a !	Refugee Program		900099	6,384,235	6,384,235		
윤	b							
M C	С.							
<i>3</i> 3	d .							
E	e .	A II - + h						
Program Service Revenue		All other program service re						
		Total. Add lines 2a-2f			6,384,235			
Ι,		Investment income (includir and other similar amounts)		-	37,783		-2,462,299	2,500,08
		Income from investment of tax-ex		<u> </u>	·			
:	5	Royalties		Ţ				
			(ı) Real	(II) Personal				
		Gross Rents						
	_ (Less rental expenses						
	(Rental income or (loss)						
F	d	Net rental income or (loss)		(1) O H = 1				<u> </u>
7	1	Gross amount from sales of assets other than inventory	(1) Securities 13,435,043	(II) O ther				
	ь	Less cost or other basis and						
		sales expenses Gaın or (loss)	13,435,043					
	d I	Net gaın or (loss)			13,435,043		283,438	
, 	8a (Gross income from fundraisi	ng events					13,151,6
		(not including						
מ מ	:	\$ of contributions reported on	line 1c)					
	:	See Part IV, line 18	а					
	b i	Less direct expenses .						
' L		Net income or (loss) from fu						
[ictivities See Part IV, line 19 .					
		Less direct expenses . Net income or (loss) from ga		b				
:	10a	Gross sales of inventory, les returns and allowances						
	L.	1000 0004 0000 400 111	a					
		Less cost of goods sold . Net income or (loss) from sa						
	- '	Miscellaneous Revenue	,	Business Code				1
	11a ,	Administrative Service		900099	1,489,328	1,489,328		
	b i	Mailroom & Telcom Serv	_	900099	702,614			
		Communications		511120	180,826			180,8
	d .	All other revenue						
	е .	Total. Add lines 11a–11d			2,372,768			
	12 ·	Total revenue. See Instructi	ons	}	94,216,459		-2,178,861	

	990 (2010)				Page 10
Part	Statement of Functional Expenses		-1		
Α	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, b, 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	87,816,769	87,816,769		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	296,350	296,350		
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	673,520	191,632	481,888	
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	2,619,838	745,403	1,874,435	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	321,386	110,243	211,143	
10	Payroll taxes	214,257	73,495	140,762	
а	Fees for services (non-employees) Management	165,619	133,961	31,658	
b	Legal	23,776	13,202	10,574	
c	Accounting	217,542	39,490	178,052	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				_
f	Investment management fees				
g	Other	118,208	103,300	14,908	
12	Advertising and promotion	13,961	8,567	5,394	
13	Office expenses	409,866	112,903	296,963	
14	Information technology	271,622	16,983	254,639	_
15	Royalties		,	,	
16	Occupancy	438,998	201,547	237,451	
17	Travel	45,079	15,140	29,939	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,		23,723	
19	Conferences, conventions, and meetings	142,295	41,312	100,983	_
20	Interest	,	· -, - 	,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,522	1,522		
23	Insurance	101,592	_,	101,592	
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)	,			
а	Temporary Help	12,180	5,181	6,999	
b					
С					
d					
e					
f	All other expenses	48,056	415	47,641	
25	Total functional expenses. Add lines 1 through 24f	93,952,436	89,927,415		0
26	Joint costs. Check here ► ☐ If following	,,	, ==, ==	, ==,====	
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	The state of the s				000 (2010)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,890,415	1	1,641,582
	2	Savings and temporary cash investments			16,027,961	2	17,701,576
	3	Pledges and grants receivable, net			18,114,264	3	17,060,635
	4	Accounts receivable, net			3,011,722	4	3,396,648
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key	employees, and			
		Schedule L			30,250	5	26,440
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing ensponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	nploye	ers, and			
sts		Schedule L				6	
Assets	7	Notes and loans receivable, net			12,786,152	7	12,274,257
۲	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	729,820			
	b	Less accumulated depreciation	tion 10b 3,805				
	11	Investments—publicly traded securities		122,261,565	11	150,297,770	
	12	Investments—other securities See Part IV, line 11	222,139,929	12	223,493,549		
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	68,875,011	15	66,665,287		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			465,864,806	16	493,283,759
	17	Accounts payable and accrued expenses .			7,666,789	17	7,890,017
	18	Grants payable				18	
	19	Deferred revenue			1,486,996	19	614,792
	20	Tax-exempt bond liabilities		10,925,000	20	10,540,000	
es.	21	Escrow or custodial account liability Complete Part IV of Schedule	₽D.			21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			17,684,942	23	16,320,000
	24	Unsecured notes and loans payable to unrelated third parties				24	_
	25	Other liabilities Complete Part X of Schedule D		61,297,103	25	47,651,124	
	26	Total liabilities. Add lines 17 through 25			99,060,830	26	83,015,933
-A		Organizations that follow SFAS 117, check here ► 🔽 and comp	lete li	nes 27			
Balances		through 29, and lines 33 and 34.					
lan	27	Unrestricted net assets			246,056,183	27	281,548,389
B 3	28	Temporarily restricted net assets		61,755,994	28	66,058,064	
Fund	29	Permanently restricted net assets			58,991,799	29	62,661,373
Fu		Organizations that do not follow SFAS 117, check here ▶ ┌ and	d com	plete			
ě		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fur	nds			32	
Net	33	Total net assets or fund balances			366,803,976		410,267,826
	34	Total liabilities and net assets/fund balances			465,864,806	34	493,283,759

14:1	Check if Schedule O contains a response to any question in this Part XI			河.	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		94.3	216,45
2	Total expenses (must equal Part IX, column (A), line 25)	2			952,43
3	Revenue less expenses Subtract line 2 from line 1	3		2	264,02
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		366,8	803,97
5	Other changes in net assets or fund balances (explain in Schedule O)	5		43,:	199,82
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		410,2	267,82
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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 Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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

DLN: 93493136044792

OMB No 1545-0047

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Jewish Federation of Metropolitan Chicago

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.

Employer identification number

36-2167761 Reason for Public Charity Status (All organizations must complete this part.) See instructions

3 A ho hosp 4 A m hosp 5 And sect 6 A fe 7 And desc 8 A co 9 And rece its sacqu 10 And one the land a e By cothe sect f If the chec g Since follo (i) a and (ii) (iii)	rganization of ion 170(b)(1) deral, state, or rganization the ribed in ion 170(b)(1) mmunity trus rganization the ribed in ion 170(b)(1) mmunity trus rganization of rganization or rganization or rganization or rganization or rganization of rganization 509(a)(2) de organization k this box e August 17, wing persons	received a written de 2006, has the organi	t of a college art II) government a substantia art II) 1 170(b)(1)(a (1) more the cempt function and unrel 30,1975 Sidexclusively ations described organization art than one etermination	cation description with a or university and unit description and a subject of the best form to test form the best form the I from the I	ribed in section a hospital des a hospital des a hospital des a lity owned or control of the support of the certain eless taxable in 509(a)(2). (Complete line in 509(a)(1) complete line in Functional trolled directly support in sup	perated by ion 170(b)(a government I) c from contri xceptions, acome (less complete Pa Seesectio form the fur) or section es 11e thro lly integrate y or indirect ed organizate	a government (1)(A)(v). The tributions, mem and (2) no most section 511 art III) In 509(a)(4). Inctions of, or the 509(a)(2) Sugh 11h ard the ded the sections described articles are the sections described articles.	rom the obershire than from tax) from tax) from tax from	describe general p fees, an a 331/3% om busine ion 509(a Type III) squalified ection 50	public of esses purpos a)(3). - Oth person of esses	es of Check er ns) or
4 A m hosp 5 And sect 6 A fe 7 And desc sect 8 A co 9 And receives acquired acq	rganization o ion 170(b)(1) deral, state, o rganization the ribed in ion 170(b)(1) mmunity trus rganization the post from actiupport from guired by the organization or more public tox that descor Type I hecking this I r than foundation 509(a)(2) a organization k this box e August 17, wing persons	th organization operatively, and state perated for the benefit (A)(iv). (Complete Parallel (A)(vi). (Complete Par	t of a college art II) government a substantial art II) 1170(b)(1)(a) (1) more the cempt function and unrel 30,1975 Sidexclusively at least 10 second art 10 corganization are than one etermination	cor universital unit desiral part of its al part of	a hospital des	perated by ion 170(b)(a government I) c from contri xceptions, acome (less complete Pa Seesectio form the fur) or section es 11e thro lly integrate y or indirect ed organizate	a government (1)(A)(v). The tributions, mem and (2) no most section 511 art III) In 509(a)(4). Inctions of, or the 509(a)(2) Sugh 11h ard the ded the sections described articles are the sections described articles.	rom the obershire than from tax) from tax) from tax from	describe general p fees, an a 331/3% om busine ion 509(a Type III) squalified ection 50	public of esses purpos a)(3). : - Oth I perso	es of Check er ns) or
hosp And sect A fe A fe A A co By And rece its s acqu And one the l By c othe sect f If th chee g Since follo (i) a and (ii) h Prov	rganization o ion 170(b)(1) deral, state, o rganization the ribed in ion 170(b)(1) mmunity trus rganization the ribed port from guired by the organization or more public tox that descor Type I hecking this I r than foundation 509(a)(2) a organization k this box e August 17, wing persons	perated for the benefit (A)(iv). (Complete Par local government or at normally receives (A)(vi) (Complete Par described in section at normally receives vities related to its exposs investment incorganization after June ganized and operated by supported organized and operated by supported organized in the section of the supported organized and operated by supported organized in the section managers and other received a written decay of the supported organized and other received a written decay of the supported organized and other received a written decay of the supported organized and other received a written decay of the supported organized and other received a written decay of the supported organized and other supported organiz	t of a college art II) government a substantial art II) 1770(b)(1)(4) (1) more the compt function and unrel 30, 1975 Sidexclusively dexclusively ations descrorting organ I corganization mer than one etermination	al unit destal unit destal unit destal part of its al part of its al part of its and 331/3% ons—subject lated busing to test for the beginned in section and Type II. Its not conformore put from the I	cribed in sects support from omplete Part I of its support to certain eless taxable in 509(a)(2). (Complete line in 509(a)(1) complete line in Functional trolled directly support	ion 170(b)(a government for a government for from control accome (less complete Pa complete Pa form the fur	a government (1)(A)(v). The tributions, memorated and (2) no most section 511 The tributions of, or the 509(a)(2) Sough 11head the tributions described at long described.	rom the obershire than from tax) from tax) from tax from	describe general p fees, an a 331/3% om busine ion 509(a Type III) squalified ection 50	public of esses purpos a)(3). : - Oth I perso	es of Check er ns) or
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9 And receives acquired and cone the following sect following and (ii) a and (iii) h Proving following following and (iii) a and (iiii) a and (iii) a and (iiii) a and (ii	rganization the ipts from action upport from guired by the organization or more public that descont that foundation 509(a)(2) are organization k this box e August 17, wing persons	at normally receives vities related to its exposs investment incorganization after June reganized and operated reganized and operated ribes the type of supports of the type of supports of the first that the received a written decay of the type of type of the type of type of the type of typ	(1) more the compt function me and unreleased and unreleased and unreleased and unreleased are conclusively actions descrorting organ and companization mer than one	an 331/3% ons—subje lated busing fee section of the best for the best for the best for the best for the section and Type I: I is not conformore puffrom the I	of its support ct to certain e ess taxable ir 509(a)(2). (C public safety nefit of, to per tion 509(a)(1 complete line II - Functiona trolled directly blicly support	t from continuous, accome (less omplete Passection of the furth of the	and (2) no moss section 511 art III) n 509(a)(4). nctions of, or to 509(a)(2) Sugh 11h ed tly by one or nations describ	re than tax) fro o carry oee sect d	out the lion 509(a Type III squalified section 50	of esses purpos a)(3). :- Oth d perso 9(a)(1	es of Check er ns) or
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follo (i) a and (ii) (iii) h Prov	wing persons		zation accep	otea anv ai		6					 -
and (ii) (iii) h Prov	person who d	rectly or indirectly co	ontrols, eithe	, -						Yes	No
(ii) (iii) h Prov		governing body of the			_	p = 1 = 1 = 1 = 1			11g(i)		
(iii) h Prov		er of a person describ		_					11g(ii)		
h Prov	*	lled entity of a persor			above?				11g(iii)		
		ng information about							3()		
supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	e Ion In ted In Erning	(v) Did you no organizat col (i) or suppo	tify the tion in fyour	(vi) Is th organizat col (i) org in the U	e ion in anized		(vii) A mount of support	
	-	inst ruct ions))	Yes	No	Yes	No	Yes	No			
						+					
Total											

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.)

	under Part III. II d	ne organization	Talls to quality	under the tests	iisted below, pi	ease co	Tiplete F	Part III.)				
	ection A. Public Support endar year (or fiscal year beginning	a	1									
Car	in) ►	⁹ (a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total				
1	Gifts, grants, contributions, and											
	membership fees received (Do	123,590,86	96,682,392	92,299,007	63,270,556	71	,986,630	447,829,454				
	not include any "unusual]			,,,,,,,,,,	,,				
_	grants ")											
2	Tax revenues levied for the organization's benefit and either											
	paid to or expended on its											
	behalf											
3	The value of services or facilities											
	furnished by a governmental unit											
	to the organization without											
	charge											
4	Total. Add lines 1 through 3	123,590,86	96,682,392	92,299,007	63,270,556	71	,986,630	447,829,454				
5	The portion of total contributions											
	by each person (other than a											
	governmental unit or publicly											
	supported organization) included on line 1 that exceeds 2% of the											
	amount shown on line 11, column											
	(f)											
6	Public Support. Subtract line 5							447,829,454				
	from line 4							447,029,434				
	ection B. Total Support											
Cale	endar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total				
_	beginning in)	123,590,869	96,682,392	92,299,007	63,270,556			71 986 630		71,986,630		447,829,454
7	A mounts from line 4 Gross income from interest,	123,390,609	90,002,392	92,299,007	03,270,330	71,980,030		447,629,434				
8	dividends, payments received											
	on securities loans, rents,	6,498,458	6,124,931	3,861,875	2,237,795		37,783	18,760,842				
	royalties and income from	, ,	, ,	, ,	, ,		, I	, ,				
	similar sources											
9	Net income from unrelated											
	business activities, whether or											
	not the business is regularly											
	carried on											
10	Other income Do not include											
	gain or loss from the sale of	207,222	217,968	182,981	201,862		180,826	990,859				
	capital assets (Explain in Part IV)											
11	Total support (Add lines 7							167 501 155				
	through 10)							467,581,155				
12	Gross receipts from related activ	ities, etc (See ins	structions)			12		25,040,222				
13	First Five Years If the Form 990 i	s for the organizat	ion's first, second	d, third, fourth, or f	fifth tax year as a	501(c)(3) organız	ation,				
	check this box and stop here							▶ ┌				
	action C. Computation of D	ublic Gunnaut	Dorgontogo									
<u> </u>	ection C. Computation of Pu Public Support Percentage for 20			11 column (f))		144		05.700.0/				
	-	•		11 column (1))		14		95 780 %				
15	Public Support Percentage for 20					15		94 520 %				
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more	, check t	his box ► ✓				
h	and stop here. The organization q 33 1/3% support test—2009. If the				ia and line 1 Fig.	2 2 1/20/2	or more	. ,				
D	box and stop here. The organizati				oa, and inte 15 is	33 1/3%	or more,	CHECK UIIS ▶□				
17a	10%-facts-and-circumstances tes				ne 13 16a or 16	h and line	14 د	-1				
	is 10% or more, and if the organiz											
	in Part IV how the organization m							ed				
	organization			· · · · · · · · · ·	,		, process	▶ ┌				
b	10%-facts-and-circumstances tes	st—2009. If the or	ganızatıon dıd not	check a box on lir	ne 13, 16a, 16b, d	or 17a an	ıd lıne					
	15 is 10% or more, and if the org											
	Explain in Part IV how the organiz	zation meets the "	facts and circums	tances" test The	organızatıon qua	lifies as a	a publicly					
4.0	supported organization			46 461 4-	471 1 1 1 1			► □				
18	Private Foundation If the organize	ation did not chec	ка box on line 13	, 16a, 16b, 17a o	r 1 / b, check this	box and	see	▶ □				
	ınstructions							F-1				

Schedule A (Form 990 or 990-EZ) 2010 Page 3 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 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 **(e)** 2010 (f) Total ın) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 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

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 ►E organization

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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))

Investment income percentage from 2009 Schedule A, Part III, line 17

17

18

17

18

Supplemental Information. 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).

Explanation

 ${\bf Schedule\ A\,,Part\ II,Line\ 10\,,Explanation\ of\ Other\ Income\ Communications}$

DLN: 93493136044792

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990 Part IV Line 5 (Proxy Tax) or Form 990 F7 Part V Line 35a (Proxy Tax) then

	me of the organization ish Federation of Metropolitan Chicago			Employer ide	entification number
jew	ish rederation of Metropolitan Chicago			36-216776	1
ar	t I-A Complete if the or	ganization is exempt und	er section 501(
	Provide a description of the org	ganızatıon's dırect and ındırect po	olitical campaign act	ivities in Part IV	
:	Political expenditures			▶	\$
3	Volunteer hours				
	t I-B Complete if the or	ganization is exempt und	or sostion FO1/	a)(2)	
<u>ar</u>	<u> </u>	e tax incurred by the organization	_		Φ.
2	·	e tax incurred by organization ma			Φ
3	·	ection 4955 tax, did it file Form	-	11 4 9 3 3 F	→
la	Was a correction made?	rection 1555 tax, ara teme form	Tree for time year		「Yes □ No
b	If "Yes," describe in Part IV				, 155 , 115
		ganization is exempt und	er section 501(c) except section 50	D1(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	rganızatıon's funds contributed to	o other organization:	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	0-POL, line 17b	\$
4 Did the filing organization file Form 1120-POL for this year?					
		•	r (EIN) of all sectior	527 political organizatio	Yes No
	Enter the names, addresses ar organization made payments f amount of political contribution	Form 1120-POL for this year? Ind employer identification number For each organization listed, ente Ins received that were promptly ar Inspection political action committee (PAC)	r the amount paid frond frond frond frond frond front	om the filing organization's to a separate political org	ns to which the filing s funds Also enter the ganization, such as a
	Enter the names, addresses ar organization made payments f amount of political contribution	nd employer identification number For each organization listed, ente ns received that were promptly ar	r the amount paid frond frond frond frond frond front	om the filing organization's to a separate political org	(e) A mount of politica contributions received and promptly and directly delivered to a separate political
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	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification number For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization's to a separate political org is needed, provide inform (d) A mount paid from filing organization's	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,
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5	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification number For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization's to a separate political org is needed, provide inform (d) A mount paid from filing organization's	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,
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	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification number For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization's to a separate political org is needed, provide inform (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1	o)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
С	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		331,198
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1i			331,198
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ì	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
Explanation of Other Lobbying Activities	Part II-B, Line 11	During the fiscal year ended June 30, 2011, the Jewish Federation maintained offices in Springfield, Illinois and Washington D C with the primary purpose of monitoring legislation, which would directly affect not for profit organizations. In connection with these activities, the staffs of the Federation at these offices stand in readiness to assist legislators by offering their expertise in matters of operation and management of such organizations and the defining of the positions of such agencies in regard to such legislation. This includes activities such as testifying before legislative committees, preparation of position papers and circulation of information on current developments to our constituency. The net cost of operating these offices during the year ended June 30, 2011, was \$331,198

DLN: 93493136044792

OMB No 1545-0047

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.

Open to Public

	me of the organization	·	Employer identification number				
Jew	36-2167761						
Pa	organizations Maintaining Donor A organization answered "Yes" to Form 9	90, Part IV, line 6.	nds or Accounts. Complete if the				
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year	820					
2	Aggregate contributions to (during year)	23,256,602					
3	Aggregate grants from (during year)	23,622,945					
4	Aggregate value at end of year	90,700,980					
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	3	radvised				
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit	nefit of the donor or donor advisor, or for any	y other purpose				
Pai	rt III Conservation Easements. Complete	if the organization answered "Yes" to	Form 990, Part IV, line 7.				
2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	cion or pleasure)	historically importantly land area ertified historic structure of a conservation				
	casement on the last day of the tax year	Г	Held at the End of the Year				
а	Total number of conservation easements		2a				
ь	Total acreage restricted by conservation easement	s	2b				
c	Number of conservation easements on a certified hi	storic structure included in (a)	2c				
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d				
3	Number of conservation easements modified, transf the taxable year ►		by the organization during				
4 5	Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds	g the periodic monitoring, inspection, handl	— ling of violations, and Yes No				
6	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easeme	ents during the year 🗕				
7 8	Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line						
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?		☐ Yes ☐ No				
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial sments	statements that describes				
Par	Complete if the organization answered		or Other Similar Assets.				
1a	If the organization elected, as permitted under SFA: art, historical treasures, or other similar assets helprovide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or research	h in furtherance of public service,				
b	If the organization elected, as permitted under SFA: historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in					
	(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, his following amounts required to be reported under SFA		financial gain, provide the				
а	Revenues included in Form 990, Part VIII, line 1		▶ \$				

b Assets included in Form 990, Part X

e l	1911 Organizations Maintaining Co	<u>llections of Art,</u>	His	torical Tr	<u>easure</u>	es, or (<u>Othe</u>	r Similar As	sset	5 (cor	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e following t	hat are a	a signific	ant u	ise of its collec	tion		
а	Public exhibition		d	☐ Loan d	rexcha	nge prog	grams	i			
b	Scholarly research		e	┌ Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how	they furthe	r the org	anızatıo	n's ex	kempt purpose	ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							nılar	┌ Y	es	┌ No
Pai	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					nswer	ed "Y	es" to Form !	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other intermed	diary	for contribut	ions or	other as	sets	not	┌ Y	es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	ollow	ing table				Aı	moun	t	
c	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 000 Part V line	212								
			21,						, 1	25	1 140
b Da	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete		ans	wered "Ves	s" to Fo	rm 990) Dai	rt IV line 10			
	Endownent Funds. complete	(a)Current Year		Prior Year		Years Ba	·	(d)Three Years Back		our Ye	ears Back
1a	Beginning of year balance	234,618,632		216,010,352		220,472	,079				
b	Contributions	14,498,471		34,409,260		60,602	,318				
c	Investment earnings or losses	36,638,289		22,437,049		-34,001	914				
d	Grants or scholarships										
e	Other expenditures for facilities	21,950,744		38,238,029		31,062	,131				
_	and programs						-+		-		
Т	Administrative expenses	263,804,648		234,618,632		216,010	252				
g	End of year balance			234,010,032		210,010	,332				
2	Provide the estimated percentage of the yea		S								
а	Board designated or quasi-endowment 🕨	55 690 %									
b	Permanent endowment ► 23 750 %										
C	Term endowment ▶ 20 550 %										
За	Are there endowment funds not in the posses organization by	ssion of the organiza	tion t	hat are held	and adr	nınıster	ed for	the		w T	- NI -
	(i) unrelated organizations							3a		Yes	No No
	(ii) related organizations										No
b	If "Yes" to 3a(II), are the related organization		on S	chedule R?			٠.	· · · · -	b		
4	Describe in Part XIV the intended uses of th	e organization's end	owme	nt funds							
Pai	rt VI Investments—Land, Buildings	s, and Equipmer	ıt. S	ee Form 99	90, Parl	X, line	10.				
	Description of investment			(a) Cost or basis (inves		b) Cost or basis (of		(c) Accumulate depreciation	ed (d) Bo	ok value
1a	Land					6:	10,413				610,413
b	Buildings					10	08,750				108,750
c	Leasehold improvements										
d	Equipment					:	10,657	3,8	305		6,852
e	Other										

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) .

726,015

Part VII Investments—Other Securities. See F	orm 990, Part X, line 12)	
(a) Description of security or category	(b) Book value		d of valuation -year market value
(including name of security) (1)Financial derivatives		Cost or end-or	- year market value
(2)Closely-held equity interests			
(3)Other			
(A) Investment in Partnerships	152,399,685		F
(B) Other	1,500,233		F
(b) other	1,300,233		<u>'</u>
(C) Accrued Investment Income	49,523		F
(D) Hedge Funds	69,544,108		F
(b) fredge f dfid3	05,544,100		<u>'</u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	223,493,549		
Part VIII Investments—Program Related. See	Form 990, Part X, line 1		
(a) Description of investment type	(b) Book value		d of valuation -year market value
		Cost of cha of	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin	<u> </u> a 15		
(a) Descrip			(b) Book value
(1) Bond Escrow			33,793
(2) Other Assets			354,346
(3) Beneficial Interest in Charitable Trust			26,622,030
(4) Due from JFMC Facilities Corp			30,214,647
(5) Due from Jewish United Fund of Metropolitan Chicago			9,440,471
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15	5.)		66,665,287
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
Funds Held on Behalf of Others	25,632,436		
Appropriations Payable	2,702,491		
Interest Rate Swap Liability	18,972,468		
Due to Affiliated Agencies	343,729		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	47,651,124		
•	, ,		

3	Total expenses (Form 990, Part IX, column (A), line 25)	2	
	Evenes or (defeat) for the year Cubtreat line 2 from line 1		
	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
	Other (Describe in Part XIV)	8	
_	Total adjustments (net) Add lines 4 - 8	9	
	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Ret	urn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part)	Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	eturn
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Part	XIV Supplemental Information		

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

Identifier	Return Reference	Explanation
Description of Intended Use of Endowment Funds	Part V, Line 4	To provide funding for Jewish Federation/Jewish United Fund affiliated agency and beneficiary agency programs
Description of Uncertain Tax Positions Under FIN 48	Part X	The Federation, an Illinois nonprofit corporation, is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and applicable state law However, income from certain activities not directly related to the Federation's tax-exempt purposes, such as unrelated business income allocated from investment partnerships, is subject to taxation. The Federation paid no income taxes on unrelated business income in 2011 and 2010. The accounting standard on accounting for uncertainty in income taxes addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under this guidance, the Federation may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the position Examples of tax positions include the tax-exempt status of the Federation, the continued tax-exempt status of bonds issued by the Federation, and various positions related to the potential sources of unrelated business taxable income. The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50 percent likelihood of being realized upon ultimate settlement At June 30, 2011 and 2010, there were no unrecognized tax benefits identified or recorded as liabilities. The Federation files forms 990 and 990-T in the U.S. federal jurisdiction and the State of Illinois. With few exceptions, the Federation is generally no longer subject to examination by the Internal Revenue.

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As Filed Data -

DLN: 93493136044792

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

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

Statement of Activities Outside the United States

► Attach to Form 990. ► See separate instructions.

Name of the organization

Jewish Federation of Metropolitan Chicag

Employer identification number

- ۱۸/۱	sh Federation of Metropolitan Chi	cado				
. ***	on reactation of rectiopolical con-	uugo			36-2167761	
Pa	rt I General Informatio "Yes" to Form 990, Pa			he United States. C	omplete if the organiz	zation answered
1	For grantmakers. Does the assistance, the grantees' eligible the grants or assistance?	organization n gibility for the	naıntaın record grants or assıs	stance, and the select	on criteria used to aw	
2	For grantmakers. Describe in Pa United States	art V the organiz	atıon's procedur	es for monitoring the use	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	Europe (Including Iceland & Greenland)	0	0	Investments		25,048,991
	Central America and the Caribbean	0	0	Investments		27,412,771
	Sub-total Total from continuation sheets	0	0			52,461,762
- 0	i otal from continuation sneets	1 -	1	I	İ	i (

52,461,762

Pai	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
2	Enter total nur tax-exempt b	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . ▶			
3	Enter total number of other organizations or entities										

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

Use Part v ir additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
		1							
		1							
		1			1				
_									
	l					Colore	lula E (Earm 000) 2010		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	<u> </u>	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	~	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	굣	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	~	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	F	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	No

Schedule F (Form 990) 2010

Additional Data

Software ID:

Software Version: EIN: 36-2167761

Name: Jewish Federation of Metropolitan Chicago

Schedule F (Form 990) 2010

Page **5**

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

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Schedule I

(Form 990)

Internal Revenue Service

Name of the organization

Jewish Federation of Metropolitan Chicago

DLN: 93493136044792

OMB No 1545-0047

Governments and Individuals in the United States Department of the Treasury

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

Grants and Other Assistance to Organizations,

Inspection Employer identification number

36-2167761

Part I General Information	n on Grants and	Assistance					
Does the organization maintain the selection criteria used to av Describe in Part IV the organization	ward the grants or ass	sistance?			the grants or assist	ance, and	✓ Yes 🗀
Part II Grants and Other A Form 990, Part IV, lin duplicated if additional	e 21 for any recipi	ent that received r	nore than \$5,000. Ch	eck this box if no one	e recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
Enter total number of section 50Enter total number of other organization		-				<u>*</u> _	117
For Privacy Act and Paperwork Reduction				Cat No 50055P			le 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. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Housing, transportation, food and medical assistance	7	4,991			
(2) Tuition awards for national & international study at college and postgraduate levels	32	29,473			
(3) Awards and grants for educational and leadership out-of-state conferences	6	2,867			
(4) Awards and grants for Israel experience costs	459	259,019			

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

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Grants made by the Jewish Federation of Metropolitan Chicago (The Federation) in the United States are monitored through an extensive process involving professionals and nearly 200 volunteers that includes submission of budgetary and programmatic information as well as face to face meetings with many of the grant recipients. The process entails submission and review of fiscal information (including updated budgets and audits) as well as program specific information including outcome measures when appropriate. Grants made to the Federation are then allocated to various affiliated agencies which have a long relationship with the Federation and notwithstanding this, both lay and professional leadership continue to assess the use of grants that are provided to them. The review is accompanied by face to face visits in which programs funded by the Federation are reviewed. The Federation also takes advantage of information that the grantees provide to accrediting and other funding bodies.

Software ID:

Software Version:

EIN: 36-2167761

Name: Jewish Federation of Metropolitan Chicago

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Akıba Schechter Jewish Day School5235 South Cornell Avenue Chicago,IL 60615	36-2600926	501(C)(3)	54,946				O perating Support
Access Community Health Network222 North Canal Street Chicago, IL 60606	36-3317058	501(C)(3)	5,396				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Agudath Israel of Illinois 3542 West Peterson Chicago, IL 60659	36-3529801	501(C)(3)	5,995				O perating Support
Alıyah Councıl (JAFI)4711 Golf Road Suite 600 Skokie, IL 60076	23-0053483	501(C)(3)	39,867				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Friends of B'shvilaych1074 East 19th Street Brooklyn,NY 11230	42-1610999	501(C)(3)	12,900				O perating Support
American Jewish Joint Distribution Committee711 3rd Avenue New York, NY 10017	13-1656634	501(C)(3)	38,000				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Jewish World Service45 West 36th Street New York, NY 10018	22-2584370	501(C)(3)	5,000				O perating Support
A merican Supporters of Yedid Inc492c Cedar Lane 335 Teaneck, NJ 07666	20-0426364	501(C)(3)	10,500				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Antı-Defamatıon League605 Thırd Avenue New York, NY 10158	13-1818723	501(C)(3)	9,072				O perating Support
Arie Crown Hebrew Day School4600 Main Street Skokie,IL 60076	36-2129620	501(C)(3)	362,965				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ark6450 North California Avenue Chicago,IL 60645	23-7164967	501(C)(3)	533,857				O perating Support
Associated Talmud Torahs 2828 West Pratt Boulevard Chicago, IL 60645	36-2169123	501(C)(3)	3,035,336				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Association House of Chicago1116 North Kedzie Avenue Chicago,IL 60651	36-2166961	501(C)(3)	39,102				O perating Support
AVODAH The Jewish Service Corps4707 N Broadway 3rd Floor Chicago,IL 60640	13-3914342	501(C)(3)	10,000				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bais Yaakov Girls High School3333 West Peterson Avenue Chicago,IL 60659	36-3777432	501(C)(3)	51,995				O perating Support
Bernard Zell Anshe Emet Day School3751 N Broadway Street Chicago,IL 60613	36-2166955	501(C)(3)	5,500				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bıkur Cholim Hospital156 Fifth Avenue New York, NY 10010	31-1763039	501(C)(3)	9,344				O perating Support
B'Nai B'rith Beber Camp 4930 Oakton Street Suite 4019 Skokie,IL 60077	27-2025066	501(C)(3)	10,290				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Brandeis University415 South Mailstop 110 Waltham, MA 02454	04-2103552	501(C)(3)	77,988				O perating Support
Camp Agudah Midwest3555 West Peterson Avenue Ste 109 Chicago,IL 60659	36-3529801	501(C)(3)	7,950				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Chi5050 Church Street skokie,IL 60077	36-2167758	501(C)(3)	14,715				O perating Support
Camp Moshava of Wild Rose 3740 W Dempster Skokie,IL 60076	36-3874839	501(C)(3)	22,210				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Ramah65 East Wacker Drive Chicago,IL 60601	36-6009250	501(C)(3)	19,469				O perating Support
Camp Young Judaea Midwest 4711 Golf Road Suite 600 Skokie,IL 60076	39-1672846	501(C)(3)	7,240				Camp Young Judaea Midwest

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Catholic Charities of Chicago721 North LaSalle Drive Chicago,IL 60654	36-2170821	501(C)(3)	220,408		other)		O perating Support
Center for Jewish Comm Studies at Baltimore Hebrew Univ5800 Park Heights Avenue Baltimore, MD 21215	52-6057219	501(C)(3)	6,200				O perating Support

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Center for Learning and Leadership (CLAL)440 Park Avenue South 4th Fir New York, NY 10016	23-7390358	501(C)(3)	8,500				O perating Support
Centro de Informacion28 North Grove Avenue Ste 200 Elgin,IL 60120	36-2776988	501(C)(3)	29,345				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chai Lifeline6600 N Lincoln Avenue Lincolnwood,IL 60712	11-2940331	501(C)(3)	7,600				O perating Support
Cheder Lubavitch Hebrew Day School2809 West Jarvis Avenue Chicago, IL 60645	36-3332947	501(C)(3)	99,592				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chicago Alliance Against Sexual Exploitation3304 N Lincoln Ave Suite 202 Chicago,IL 60657	26-0220074	501(C)(3)	5,000				O perating Support
Chicago Board of Rabbis30 South Wells Street Suite 4149 Chicago,IL 60606	36-2374423	501(C)(3)	342,209				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chicago Center for Jewish Genetic Disorders30 South Wells Street Suite 5089 Chicago, IL 60606	20-0120266	501(C)(3)	58,731				O perating Support
Chicago Center for Torah & Chesed6333 North Troy Avenue Chicago,IL 60659	20-1041063	501(C)(3)	15,000				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chicago Chesed Fund7045 North Ridgeway Lincolnwood,IL 60712	36-3641111	501(C)(3)	25,000				O perating Support
Chicago Jewish Day School 5959 North Sheridan Road Chicago,IL 60660	36-4437180	501(C)(3)	41,196				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chicagoland Jewish High School1095 Lake Cook Road Deerfield,IL 60015	20-3088136	501(C)(3)	60,795				O perating Support
Chinese American Service League2141 South Tan Court Chicago,IL 60616	36-2984043	501(C)(3)	104,458				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chinese Mutual Aid Association1016 West Argyle Chicago, IL 60640	36-3139799	501(C)(3)	110,787				O perating Support
CJE Senior Life3003 West Touhy Avenue Chicago,IL 60645	36-2727597	501(C)(3)	8,425,651				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Coalition of Limited English Speaking Elderly53 West Jackson Boulevard Suite 1301 Chicago,IL 60604	36-3643461	501(C)(3)	87,583				O perating Support
Community Foundation for Jewish Education4709 Golf Road Suite 400 Skokie,IL 60076	36-3918897	501(C)(3)	2,220,081				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Erie Neighborhood House 1701 West Superior Street Chicago, IL 60622	36-3043253	501(C)(3)	144,404				O perating Support
Ethiopian Community Association of Chicago4750 North Sheridan Road 249 Chicago, IL 60640	36-3342451	501(C)(3)	72,874				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ezra Habonim - Niles Township Jewish Congregation4500 Dempster Street Skokie,IL 60076	36-2284289	501(C)(3)	7,000				O perating Support
EZRAMulti-Service Center 909 W Wilson Chicago, IL 60640	36-2167758	501(C)(3)	18,894				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gan Shalom at Temple Sholom3480 N Lake Shore Drive Chicago, IL 60657	36-2169158	501(C)(3)	6,000				O perating Support
Gateways333 Nahanton Street Newton, MA 02459	04-3494246	501(C)(3)	8,280				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
General Israel Orphans Home for Girls132 Nassau Street New York, NY 10038	13-5640819	501(C)(3)	9,344				O perating Support
Habonim Camp Tavor59884 Arthur L Jones Road Three Rivers,MI 49093	36-6009159	501(C)(3)	5,150				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hanna Sacks Bais Yaakov High School3021 West Devon Avenue Chicago,IL 60659	36-3827550	501(C)(3)	107,801				O perating Support
Hanual Family Alliance 5008-14 North Kedzie Chicago, IL 60625	36-3519498	501(C)(3)	56,514				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Harold Grinspoon Charitable Foundation380 Union Street Suite 200 West Springfield, MA 01089	22-2738277	501(C)(3)	196,998				O perating Support
Heartland Health Outreach 208 South LaSalle Street Suite 1818 1818 Chicago, IL 60604	36-3775696	501(C)(3)	562,427				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Heartland Human Care208 South LaSalle Street Suite 1818 1818 Chicago, IL 60604	36-4053244	501(C)(3)	395,301				O perating Support
Hebrew Theological College 7135 North Carpenter Skokie, IL 60077	36-2167095	501(C)(3)	563,531				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIAS - Chicago216 W Jackson Blvd Ste 700 Chicago,IL 60606	36-2167094	501(C)(3)	294,680				O perating Support
Hillel of Illinois216 W Jackson Blvd Ste 600 Chicago,IL 60606	36-2167761	501(C)(3)	1,809,821				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel Bradley University702 North Duryea Place Peoria,IL 61606	37-6053576	501(C)(3)	10,000				O perating Support
Hillel Northern Illinois University820 Russell Rd Dekalb, IL 60115	36-6124607	501(C)(3)	6,000				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hillel Southern Illinois University605 West Elm Carbondale,IL 62901	23-7052979	501(C)(3)	7,000				O perating Support
Hillel Torah North Suburban Day School7120 North Laramie Avenue Skokie,IL 60077	36-2436314	501(C)(3)	254,209				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Holocaust Memorial Foundation of IL4255 Main Street Skokie, IL 60076	36-3156154	501(C)(3)	100,000				O perating Support
Illinois Coalition for Immigrant & Refugee Rights 55 E Jackson Blvd Ste 2075 Chicago,IL 60604	36-3783551	501(C)(3)	68,800				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ida Crown Jewish Academy 2828 West Pratt Chicago, IL 60645	36-2167009	501(C)(3)	674,985				O perating Support
Immigration Project510 E Washington St 318 Bloomington,IL 61702	41-1700482	501(C)(3)	38,983				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Indo American Center6328 North California Chicago, IL 60659	36-3689665	501(C)(3)	32,352				O perating Support
Instituto de Progreso Latino (Institute of Latino Progress) 2570 South Blue Island Chicago,IL 60608	36-2937375	501(C)(3)	439,737				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
InterFaith Refugee and Immigration Ministries4753 North Broadway Suite 401 Chicago, IL 60640	36-3817743	501(C)(3)	1,099,989				O perating Support
Jewish Child & Family Services216 W Jackson Blvd Ste 800 Chicago,IL 60606	36-2167757	501(C)(3)	11,725,299				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jewish Community Centers of Chicago30 South Wells Street Suite 4000 Chicago,IL 60606	36-2167758	501(C)(3)	9,145,407				O perating Support
Jewish Labor Committee25 East 21st Street 2nd Fl New York, NY 10010	13-1675650	501(C)(3)	29,100				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jewish United Fund of Metropolitan Chicago30 South Wells Street Suite 4049 Chicago,IL 60606	36-2167034	501(C)(3)	1,069,968				O perating Support
Jewish Vocational Service (JVS)216 W Jackson Blvd Ste 700 Chicago,IL 60606	36-2167762	501(C)(3)	3,070,693				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JFMC Facilities Corporation 216 W Jackson Blvd Ste 8 Chicago, IL 60606	36-3368912	501(C)(3)	2,653,980				O perating Support
Joan Dachs Bais Yaakov School6110 North California Avenue Chicago,IL 60659	36-6009172	501(C)(3)	290,976				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Keshet617 Landwehr Rd Northbrook,IL 60062	36-3441392	501(C)(3)	22,750				O perating Support
Korean American Community Services4300 North California Avenue Chicago, IL 60618	36-2746468	501(C)(3)	80,599				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Libenu Foundation7247 Saint Louis Avenue Skokie,IL 60076	27-2149745	501(C)(3)	265,000				O perating Support
Lincoln Land Community College5250 Shepherd Road Springfield,IL 62794	37-0900960	501(C)(3)	13,678				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lubavitch Girls High School 6350 N Whipple Street Chicago, IL 60659	36-3848131	501(C)(3)	27,198				O perating Support
Mano a Mano6 E Main Street Round Lake Park,IL 60073	36-4418084	501(C)(3)	42,724				Operating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Moat Chitim4433 West Touhy Venue Suite 200 Lincolnwood,IL 60712	36-3398501	501(C)(3)	74,242				O perating Support
Moadon Early Childhood Program1454 W Willow Chicago, IL 60642	36-3843627	501(C)(3)	7,000				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Moriah Congregation200 Taub Drive Deerfield, IL 60015	36-2935511	501(C)(3)	7,000		other)		O perating Support
Mount Sinai Hospital Medical Center of Chicago1500 North California Chicago, IL 60608	36-1509000	501(C)(3)	851,295				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Conference of Synagogue Youth3200 W Touhy Chicago, IL 60645	13-5623717	501(C)(3)	5,977				O perating Support
National Immigrant Justice Center208 S LaSalle Street ste 1818 Chicago,IL 60604	36-1877640	501(C)(3)	105,470				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
New Israel Fund1101 14th Street NW 6th Fl Washington, DC 20005	94-2607722	501(C)(3)	22,000				O perating Support
North Suburban Synogogue Beth El1175 Sheridan Road Highland Park,IL 60035	36-2229590	501(C)(3)	6,250				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northwestern University 2020 Ridge Avenue Evanston, IL 60208	36-2167817	501(C)(3)	59,897				O perating Support
Oak Park Temple1235 N Harlem Oak Park,IL 60302	36-2287537	501(C)(3)	5,500				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Olin Sang Ruby Union Institute555 Skokie Blvd Suite 333 Northbrook,IL 60062	36-2642286	501(C)(3)	26,305				O perating Support
Pan African Association 6163 North Broadway Chicago, IL 60660	56-2388978	501(C)(3)	63,239				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEF Israel Endowments317 Madison Avenue Suite 607 New York, NY 10017	13-6104086	501(C)(3)	26,000				O perating Support
Pirchei & Bnos Day Camps 3555 W Peterson Avenue Chicago, IL 60659	36-3529801	501(C)(3)	10,798				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Polish American Association 3834 North Cicero Chicago, IL 60641	36-2240816	501(C)(3)	195,188				O perating Support
Project Kesher2144 Ashland Suite 3 Evanston, IL 60201	36-3673594	501(C)(3)	7,500				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Rock Valley College3301 North Mulford Rockford,IL 61114	36-2557781	501(C)(3)	380,628				O perating Support
Sargent Shriver National Center on Poverty Law50 East Washington Suite 500 Chicago, IL 60602	36-3151279	501(C)(3)	22,653				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Shalva EZRA1610 West Higgins Avenue 9 Chicago,IL 60660	36-3449507	501(C)(3)	30,000				O perating Support
Shorashim1658 North Milwaukee Ave Ste 112 Chicago,IL 60647	36-3668787	501(C)(3)	71,400				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Solomon Schechter Day School3210 Dundee Road Northbrook,IL 60062	36-2493769	501(C)(3)	315,173				O perating Support
Southwestern Illinois College 2500 Carlyle Ave Belleville,IL 62221	37-0896981	501(C)(3)	26,235				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Spertus Institute of Jewish Studies610 South Michigan Avenue Chicago,IL 60605	36-2662739	501(C)(3)	1,803,949				O perating Support
Telshe Yeshiva Chicago 3535 West Foster Avenue Chicago, IL 60625	36-2464241	501(C)(3)	106,993				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Center Resources for Teaching & Learning2626 South Clearbrook Drive Arlington Heights,IL 60005	36-4248651	501(C)(3)	124,790				O perating Support
Township High School District 2142121 South Goebbert Road Arlington Heights,IL 60005	36-6004405	501(C)(3)	61,692				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jewish Federations of North AmericaP O Box 157 Wall Street Station New York, NY 10268	13-1624240	501(C)(3)	650,304				O perating Support
University of Chicago1212 E 59th Street Chicago, IL 60637	36-2177139	501(C)(3)	47,908				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Illinois1401 West Green Street urbana, IL 61801	36-6006007	501(C)(3)	51,952				O perating Support
University of Illinois at Chicago1309 South Halsted Street chicago, IL 60607	36-6006007	501(C)(3)	25,000				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
World Relief - Aurora14 W Downer Pl Suite 8 Aurora,IL 60506	23-6393344	501(C)(3)	39,662				O perating Support
World Relief of DuPage County1825 COLLEGE AVE SUITE 230 Wheaton,IL 60187	23-6393344	501(C)(3)	1,132,403				O perating Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
World Relief - Chicago3507 West Lawrence Avenue-2nd Flr Chicago, IL 60625	23-6393344	501(C)(3)	521,641				O perating Support
Yeshivas Shearis Yisroel 2620 West Touhy Avenue Chicago,IL 60645	36-3811457	501(C)(3)	51,995				O perating Support

	(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
١	Youth Services Bureau101 West Pine Street Stillwater, MN 55082	36-2852862	501(C)(3)	21,939				O perating Support

Compensation Information

DLN: 93493136044792

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Jew	ewish rederation of metropolitan Chicago	36-2167761			
Pa	Part I Questions Regarding Compensation				
				Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of the following to or for a page 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information				
	First-class or charter travel Housing allowance or reside	ence for personal use			
	▼ Travel for companions	of personal residence			
	Tax idemnification and gross-up payments Health or social club dues of				
	Discretionary spending account Personal services (e.g., mai	ıd, chauffeur, chef)			
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy regreimbursement orprovision of all the expenses described above? If "No," complete Part		1b		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses inc officers, directors, trustees, and the CEO/Executive Director, regarding the items check		2		No
3	Indicate which, if any, of the following the organization uses to establish the compensation organization's CEO/Executive Director Check all that apply Compensation committee Independent compensation consultant Form 990 of other organizations Approval by the board or co	ct udy			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with responsion or a related organization	pect to the filing organization			
а	Receive a severance payment or change-of-control payment from the organization or a r	elated organization?	4a		No
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	-	4b	Yes	
c			4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each	h item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or a compensation contingent on the revenues of	occrue any			
а	a The organization?		5a		Νo
b	b Any related organization?		5b		Νo
	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 a compensation contingent on the net earnings of	occrue any			
а	a The organization?		6a		Νo
b	b Any related organization?		6b		Νo
	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 payments not described in lines 5 and 6? If "Yes," describe in Part III	any non-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract subject to the initial contract exception described in Regs $$ section 53 4958-4(a)(3)? If in Part III		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure	described in Regulations			

section 53 4958-6(c)?

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

	I			ı			
(A) Name	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
See Addıtıonal Data Table							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	Part I, Line 1a	During 2010, JUF paid for a flight for Steve Nasatir's wife The cost of the airfare was \$251
		Part I, Line 4b Michael Tarnoff The Jewish Federation has an agreement with Michael Tarnoff which provides for annual payments of \$30,000 per year that began in 2009 and will end in 2019. In addition, the Jewish Federation has agreed to provide Michael Tarnoff with a split dollar \$800,000 insured death benefit. The insurance is designed so that upon Michael Tarnoff's death, the Federation will receive a benefit equal to all of the premiums paid. The life insurance benefit is provided tax free to Michael Tarnoff so there is an additional cash payment to Michael Tarnoff each year to cover the taxes on the PS58 costs as well as the taxes grossed up. Steven B. Nasatir. In 1999 the Jewish Federation entered into an agreement with Steven Nasatir that was contingent upon 5 more years of service as president and CEO and would result in annual payments of \$50,000 per year (net of tax) beginning at age 64 and lasting throughout his lifetime. Dr. Nasatir began receiving payments under this agreement in 2009. The \$50,000 per year amount is to be adjusted annually in accordance with the CPI index. This benefit is payable to him only for as long as he lives. There is no guaranteed payment amount and no survivor benefit at his death. In addition, the Jewish Federation has agreed to provide Steven Nasatir with a split dollar \$1,000,000 insured death benefit. The insurance is designed so that upon Steven Nasatir's death, the Federation will receive a benefit equal to all of the premiums paid. The life insurance benefit is provided tax free to Steven Nasatir's othere is an additional cash payment to Steven Nasatir each year to cover the taxes on the PS58 costs as well as the taxes grossed up. Jeffrey Cohen. The Jewish Federation has an agreement with Peter Friedman which provides for annual payments of \$16,000 per year that began in 2007 and will end in 2017. Michael Kotzin. The Jewish Federation has an agreement with David Rosen which provides for annual payments of \$25,000 per year beginning in 2018 and lasting for ten years.

Schedule J (Form 990) 2010

Software ID: **Software Version:**

EIN: 36-2167761

Name: Jewish Federation of Metropolitan Chicago

Form 990, Schedule J, Pa	rt :	<u> II - Officers, Direc</u>	tors, Trustees, Ke	y Employees, and	Highest Compen	sated Employees		
(A) Name			f W-2 and/or 1099-MIS	·	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	belletits	(5)(1) (5)	990 or Form 990-EZ
Steven B Nasatır	(I) (II)	66,193 375,095		13,429 76,096	14,490 82,109	2,375 13,460	96,487 546,760	0
David Brief	(I) (II)	0 330,533	0 77,071	0	0 17,130	0 6,220	0 430,954	0 0
Michael Tarnoff	(I) (II)	106,964 160,446		18,946 28,418	4,060 6,090		136,304 204,454	0 0
David Rosen	(I) (II)	273,780 0	0	11,458 0	110,563 0	7,78 4 0	403,585 0	24,000
Jeffrey L Cohen	(I) (II)	97,594 146,391		8,270 12,404	63,458 95,187	3,569 5,353	172,891 259,335	26,526 0
Mıchael C Kotzın	(I) (II)	0 252,960	0	0 6,341	0 54,629	0 13,861	0 327,791	0
Peter Friedman	(I) (II)	0 188,891	0	0 13,037	0 74,667	0 13,699	0 290,294	0
Reis Kayser	(I) (II)	0 193,119	0	0 3,541	0 29,226	0 13,787	0 239,673	0
Louis Lazovsky	(I) (II)	19,412 174,711	0	48 431	7,426 66,838	1,373 12,358	28,259 254,338	
Joseph Salcık	(I) (II)	18,591 167,321		11 103	3,142 28,279	877 7,890	22,621 203,593	0
Jay Tcath	(I) (II)	16,461 166,444		10 105	2,537 25,648	793 8,014	19,801 200,211	0
Beth Cherner	(I) (II)	0 182,759	0	0	0 83,500	0 13,148	0 279,407	0
James A Pinkston	(I) (II)	22,352 156,468		0	672 4,703	1,962 13,729	24,986 174,900	
Rachel Sternberg	(I) (II)	0 159,322	0 0	0 0	0 17,273	0 750	0 177,345	0 0
Robert Schuckman	(I) (II)		0 0	992 0	37,301 0	13,586 0	204,169 0	0
James Rosenberg	(I) (II)			0 0	4,925 9,146	331 614	56,766 105,421	0 0
Susan Rifas	(I) (II)	0 140,274	0	0 1,659	0 81,627	0 7,489	0 231,049	0
Peter Chiswick	(I) (II)	0 140,985	0	0 481	0 37,687	0 8,648	0 187,801	0
Joel Poupko	(I) (II)	136,781 0	0	1,514 0	6,980 0		152,733 0	0

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493136044792

Inspection

(i) Pool

(h) On

Internal Revenue Service Name of the organization

Department of the Treasury

Part I Bond Issues

Jewish Federation of Metropolitan Chicago

Employer identification number 36-2167761

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	e (f)	(f) Description of Purpose		155061		alf of	of financing		
									Yes	No	Yes	No	Yes	No
A	Series A-1 Colorado Educational and Cultural Facilities Authority	84-0896727	196458TH6	07-23-2003	2 ,6 30 ,0 0		vate Office S tal Budget	pace and		x		X		x
В	Series A-8 Colorado Educational and Cultural Facilities Authority	84-0896727	196458J79	07-13-2005	4,720,00		Finance Development of Software			х		Х		Х
С	Series A-10 Colorado Educational and Cultural Facilities Authority	84-0896727	19645RBB6	07-26-2007	1,075,00	1111 '	A cquire and Construct Student Center			х		x		Х
D	Series F-1 Colorado Educational and Cultural Facilities Authority	84-0896727	19645RGF2	08-13-2008	4,205,00	00 Refur	Refund Prior Bonds Issues			х		x		Х
	art III Proceeds													
	art II Proceeds	Α		T E	3		С		1	D				
1	A mount of bonds retired			<u> </u>			-		1					
2	A mount of bonds legally defea	ased												
3	Total proceeds of issue				3,:	142,709		4,798,282		1,:	116,364	1	4	,207,633
4	Gross proceeds in reserve fui	nds												-
5	Capitalized interest from proc	eeds												
6	Proceeds in refunding escrow	,			4,:	4,143,254					4,143,254			
7	Issuance costs from proceed	S				26,400 42,059		13,297			7 64,37		64,379	
8	Credit enhancement from pro-	ceeds												
9	Working capital expenditures	from proceeds												
10	Capital expenditures from pro	ceeds			3,	116,309)	4,756,223		1,:	103,067	7		
11	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial completio	n			2003		20	05		2007			2008	
					Yes	No	Yes	No	Yes		No	Ye	s	No
14					X			Х			Χ	X		
15	Were the bonds issued as part of an advance refunding issue?					Χ		Х			Χ			Х
16	Has the final allocation of proceeds been made?				×		Х		Х			Х		
17	Does the organization mainta allocation of proceeds?	Х		Х		Х			X					
Pa	rt IIII Private Business l	Jse			1 -							1		
			A		<u> </u>	B		C			D			

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

Yes

Yes

Χ

Χ

Yes

Χ

Χ

Yes

Χ

Χ

			A		В		С	1	D
		Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts that may result in private business use?		×		х		х		Х
b	Are there any research agreements that may result in private business use of bond-financed property?		х		х		х		Х
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		×		Х		х		Х
Pai	t IV Arbitrage								

Pa	Arbitrage	1 -				Т _			
		A		В	_	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the								
	bond issue?								
			X		X		X		X
2	Is the bond issue a variable rate issue?	Х		X	1	Х		X	
3a	Has the organization or the governmental issuer entered								
	into a hedge with respect to the bond issue?								
		×			×		X		×
b	Name of provider	JP Morgan	•		•		•		
С	Term of hedge								
	Was the hedge superintegrated?								
			×						
	Mana a hadra tarrarratada			1					
е	Was a hedge terminated?		X						
4a	Were gross proceeds invested in a GIC?		×		×		Х		×
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market								
	value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary								
•	period?		×		×		×		×
	Did the hand are as small for force and a make the make the				1				
6	Did the bond issue qualify for an exception to rebate?		X		X		Х		X

Part V Supplemental Information

 $Complete \ this \ part \ to \ provide \ additional \ information \ for \ responses \ to \ questions \ on \ Schedule \ K \ (see \ instructions)$

Identifier	Return Reference	Explanation
Schedule K, Part IV, Line 3c, Column A - Term of Hedge		Swap #2434 JP Morgan 9/1/06-9/1/33

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493136044792

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2010

Open to Public Inspection

Name of the organization Jewish Federation of Metropolitan Chicago							E	mployer i	dent if ica	tion numb	er
Part I Excess Benefit Tran							organı		only).		
Complete if the organizat	ion ans	wered "\	Yes" on Form	1 990, P	art IV, line 25a o	or 25b, o	r Form	990-EZ,	Part V , Ii	ine 40b	
1 (a) Name of disq	ualıfıed	person			(b) Desc	rintion	of tranc	action		Cou	(c) rected?
1 (1)		F - 1 - 2 - 1			(b) Desc	. I i pcion c	or craiis	action		Yes	
2 Enter the amount of tax impos section 4958	ed on tl	ne organ • •		_	disqualified perso		ng the y • •	⁄ear unde ▶	r * \$		
3 Enter the amount of tax, If any	, on line	2, abov	/e, reımburse	ed by th	e organization .			•	· \$		
Part II Loans to and/or F											
Complete if the organiz	zation a T	nswered	l "Yes" on Fo	rm 990	, Part IV, line 26,	, or Forn	n 990-E			a I	
		oan to				(e) I	n	(f) Appro		(g)Writ	ten
(a) Name of interested person and purpose		m the zation?	(c)Orig principal a		(d)Balance due	defau		by boar	d or	agreeme	
p.a. poss	To	From]			Yes	No	commit Yes	No No	Yes	No
(1) David Brief	'	110111					110	+	110	1.03	110
Promissory Note		X		30,405	26,440		No	Yes		Yes	
								+		+	+
				► s	26,440			1			
Part IIII Grants or Assistar	ice Be	nefitti	na Intere		·						
Complete if the orga						, line 2	7.				
(a) Name of interested pers	on	(E			en interested per janization	son	(c) A m	nount of g	rant or ty	pe of assı	stance

Part IV Business Transactions Involving Interested Pers

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	ii alisweled les oli	TOTTI 990, Fait IV, III	16 Z0a, Z0b, 01 Z0c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organi	aring of zation's nues?
	organization			Yes	No
(1) Roberta Wexler	Spouse of Director		Roberta Wexler, who is the coordinator of JUF Right Start, received compensation for her services		No

Part V Supplemental Information

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

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493136044792

OMB No 1545-0047

Inspection

Open to Public

Department of the Treasury

Internal Revenue Service

SCHEDULE M

(Form 990)

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

NonCash Contributions

Name of the organization Jewish Federation of Metropolitan Chicago **Employer identification number**

36-2167761

Pa	rt 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	(d) Method of determining or amounts		ontribut	ion
1	Art—Works of art			19				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
good								
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	Х	250	11,604,057	Fair Market Value			
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts .							
25	O ther ► ()							
26	O ther ►()							
27	O ther ►()							
28	O ther ► ()							
29	Number of Forms 8283 received by for which the organization complete				29	1		0
30a	During the year, did the organizatio	n receive	by contribution any prope	rty reported in Part I, lines	1-28 that it		Yes	No
	must hold for at least three years f			on, and which is not require	d to be used			
	for exempt purposes for the entire l	holdıng p	eriod?		[30a		No
b	If "Yes," describe the arrangement	ın Part I	I					
31	Does the organization have a gift a				Ī	31	Yes	
32a	Does the organization hire or use the contributions?	hırd partı • • •	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
ь 33	If "Yes," describe in Part II If the organization did not report re describe in Part II	venues II	n column (c) for a type of p	roperty for which column (a) is checked,			

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.

Identifier	Return Reference	Explanation
Method for Determining Number of Contributors	Part I, Column (b)	is the number of contributors

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493136044792

OMB No 1545-0047

2010

Open to Public
Inspection

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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization
Jewish Federation of Metropolitan Chicago

36-2167761

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Lee I Miller, Director and Alan P Solow, Director, have a business relationship Steven Nasatir, Officer, and Michael Tarnoff, Officer, have a business relationship

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Any person who makes a payment of a contribution in an amount of not less than \$25 to the Federation directly or to the JUF to be used in whole or in part for budgetary purposes of the Federation shall be a voting member of the Federation and each of its affiliated organizations for the year in respectof which such payment is made and until final adjournment of the annual meeting of the Federation held the following year

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		Each member at each election of directors shall have one vote for as many persons as there are directors to be elected

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		A copy of the Form 990 was provided to the Board Chairman and all Audit Committee members prior to filing. The Audit Committee chairman then informed the full board of directors that committee members reviewed the Form 990 and a copy was made available to all board members.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	A conflict of interest questionnaire is circulated to all board members (directors), "officers" and key employees on an annual basis. This process is managed by JFMC'S Vice President of Board Operations who ensures all questionnaires are completed. The completed questionnaires are reviewed by management and any conflicts are disclosed to the board of directors. If a director does have a conflict or business relationship with JFMC, he or she is required to abstain from any votes related to that matter.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 15	JFMC has a compensation committee comprised of the Board Chairman, Audit Committee Chairman, Overall Planning and Allocations (Budget) Committee Chairman and outside legal counsel. This committee uses comparable data from other large nonprofit organizations to ensure compensation for JFMC executives is consistent with the market, including but not limited to an annual Total Compensation Survey of large city. Jewish Federations that is coordinated through the national Jewish Federations of North America organization and conducted each year by the Hay Group, a nationally recognized expert in the field of compensation consulting. The compensation committee approves compensation for the President of JFMC and other officers and key employees.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	The organization's governing documents, conflict of interest policy and audited financial statements are made available to all volunteer members of the Board of Directors. With regards to the general public, the organization provides these documents upon request.

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized gains on investments 35,078,852 Increase in beneficial interest in charitable trusts 3,666,231 Change in unrealized gain on on fair value of swap arrangements 3,988,435 Other changes 36,132 Supporting foundations adjustment 430,177 Total to Form 990, Part XI, Line 5 43,199,827

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493136044792

Employer identification number

36-2167761

2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Name of the organization

Jewish Federation of Metropolitan Chicago

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

▶ 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.

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) End-of-year assets	(f) Direct controlling entity	J	
(1) Tzur Fund LLC 30 S Wells Suite 4040 Chicago, IL 60606 36-2167761	Special Purpose Investmen Vehicle to Hold Hedge Fund Investments		0	94,618,838	Jewish Federation of Metropolitan Chicago		
(2) The Tkumah Fund 30 S Wells Suite 4040 Chicago, IL 60606 98-0645068	Special Purpose Investmen Vehicle to Hold Hedge Fund Investments		4,056	25,206,709	Jewish Federation of Metropolitan Chicago		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations (Complete if e tax year.)	the organization	answered "Yes" o	on Form 990, Part I'	V, line 34 becaus	e ıt had	one
(a) Name, address, and EIN of related organization		(c) egal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5: contr organi	olled
						Yes	No
See Additional Data Table							
For Privacy Act and Panerwork Peduction Act Notice see the Instruction	s for Form 990	Cat No EC	1 25 V		Schodulo P (Fr	000)	2010

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocai	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	aging	(k) Percentage ownership
							Yes	No		Yes	No	
(1) The Kochav Fund I LP 30 S Wells Suite 4049 Chicago, IL60606 98-0579113	Special Purpose Investment Vehicle Established to Hold Private Capital Invst	DE	Jewish Federation of Metropolitan Chicago	Investment	-1,299,846	73,587,042		No	-1,897,080		No	99 900 %
(2) Tbuwah Fund LP 30 S Wells Suite 4049 Chicago, IL60606 20-0291210	Special Purpose Investment Vehicle Established to Hold Private Capital Invst	NY	Jewish Federation of Metropolitan Chicago	Investment	2,960,299	50,266,676		No	-484,629		No	99 800 %
Part IV Identi	fication of Relat	ted Ord	nanizations Tax	able as a Corpo	ration or Trust	(Complete if the i	organ	ızatıon	answered "Yes"	on Fo	rm 90	90 Part IV

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
See Additional Data Table							

(6)

Pa	Transactions With Related Organizations (Complete if the organization answered "Yes	s" on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)		
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related orgar	nizations listed in Parts	s II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b	Gift, grant, or capital contribution to other organization(s)			1b	Yes	
c	Gift, grant, or capital contribution from other organization(s)			1c	Yes	
d	Loans or loan guarantees to or for other organization(s)			1d	Yes	
е	Loans or loan guarantees by other organization(s)			1e		No
f	Sale of assets to other organization(s)			1f		No
g	Purchase of assets from other organization(s)			1 g		No
h	Exchange of assets			1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)			1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)			1 j	Yes	
k	Performance of services or membership or fundraising solicitations for other organization(s)			1k		No
I	Performance of services or membership or fundraising solicitations by other organization(s)			11		No
m	Sharing of facilities, equipment, mailing lists, or other assets			1m	Yes	
n	Sharing of paid employees			1n	Yes	<u> </u>
o	Reimbursement paid to other organization for expenses			10	Yes	
р	Reimbursement paid by other organization for expenses			1р	Yes	
q	O ther transfer of cash or property to other organization(s)			1 q		No
r	O ther transfer of cash or property from other organization(s)			1r		No
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	ncluding covered relati	onships and transact	ion thresholds		
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determi involve		ount
(1)						
(2)						
(3)						
(3)						
(4)						
(5)						
		1	1			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners tion t)(3) rations?	(e) Share of end-of-year assets		f) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	h) eral or aging tner?
			Yes	No		Yes	No		Yes	No
									+	
			t			+				T
									4	_
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Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule R (Form 990) 2010

Software ID: Software Version:

EIN: 36-2167761

Name: Jewish Federation of Metropolitan Chicago

Form 990, Schedule R, Part II - Identification of Rela	ted Tax-Exempt Or	ganizations					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Sectio (b)(contr	
						Yes	No
1261 Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4018186	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Arnold I & Bette Sobel Foundation							
30 South Wells Suite 4049 Chicago, IL60606 31-1528640	Supporting Foundation	ΙL	501(C)(3)	11A	N/A		No
Bellows Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3864415	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
BLS Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4420871	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Bucksbaum Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4341914	Supporting Foundation	ΙL	501(C)(3)	11A	N/A		No
Charles & Audrey Dann Charitable Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4018189	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Chicago Center for Jewish Genetic Disorders							
30 South Wells Suite 4049 Chicago, IL60606 20-0120266	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
The First Spoke Foundation							
30 South Wells Suite 4049 Chicago, IL60606 20-0894628	Supporting Foundation	ΙL	501(C)(3)	11A	N/A		No
Crown Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3330462	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Epstein Wenger Family Support Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4380168	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Eva Cooper Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3436617	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
F6 Foundation							
30 South Wells Suite 4049 Chicago, IL60606 20-1008020	Supporting Foundation	IL	501(C)(3)	11A	N/A		No

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(conti	g) on 512 (13) rolled ization
Fel-ProMecklenburger Supporting Foundation						Yes	No
30 South Wells Suite 4049 Chicago, IL60606 36-4277383	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Glickman Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3857009	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Goodman Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4018187	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Harvey L Miller Supporting Foundation							
30 South Wells Suite 4049 Chicago, IL60606 90-0187252	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Helene Diamond & Jorde Nathan Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4157242	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Irvin & Ruth Swartzberg Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3864416	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Jewish United Fund of Metropolitan Chicago							
30 South Wells Suite 4049 Chicago, IL60606 36-2167034	Fundraising	IL	501(C)(3)	11A	N/A		No
JFMC Facilities Corporation	Property Management						
30 South Wells Suite 4049 Chicago, IL60606 36-3368912	of Related Non-Profit Organizations	IL	501(C)(3)	11A	N/A		No
Lawrence E & Nancy S Glick Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3662985	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Leibow Family Supporting Foundation							
30 South Wells Suite 4049 Chicago, IL60606 20-1420425	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Leonard and Diane Sherman Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4345181	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Leonard Rose Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4420873	Supporting Foundation	IL	501(C)(3)	11A	N/A		No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g Section (b)(i contro organiz	n 512 13) folled					
						Yes	No					
Lya and Louis Rosenblum Family Foundation												
30 South Wells Suite 4049 Chicago, IL60606 31-1529058	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Manfred and Fern Steinfeld Family Foundation						['						
30 South Wells Suite 4049 Chicago, IL60606 36-4244346	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Norma and Lester Rosenberg Family Foundation												
30 South Wells Suite 4049 Chicago, IL60606 31-1623344	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Paul G Delman Foundation												
30 South Wells Suite 4049 Chicago, IL60606 36-3914632	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Philip & Sylvia Spertus Supporting Foundation						'	<u> </u>					
Chicago, IL60606 36-3864413	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Prairie Minerals Foundation						[
30 South Wells Suite 4049 Chicago, IL60606 32-0062771	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
The Pritzker Family Philanthropic Fund												
71 S Wacker Drive Ste 4600 Chicago, IL60606 36-3623264	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Ring Family Supporting Foundation												
30 South Wells Suite 4049 Chicago, IL60606 20-1642012	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Robert L & Sylvia M Haag Foundation						['						
30 South Wells Suite 4049 Chicago, IL60606 30-0149729	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Rose Family Supporting Foundation												
30 South Wells Suite 4049 Chicago, IL60606 20-5389086	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Sarnoff Levin Family Supporting Foundation												
30 South Wells Suite 4049 Chicago, IL60606 36-4157233	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Seder Family Foundation						['						
30 South Wells Suite 4049 Chicago, IL60606 36-3988995	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
30 South Wells Suite 4049 Chicago, IL60606 20-1642012 Robert L & Sylvia M Haag Foundation 30 South Wells Suite 4049 Chicago, IL60606 30-0149729 Rose Family Supporting Foundation 30 South Wells Suite 4049 Chicago, IL60606 20-5389086 Sarnoff Levin Family Supporting Foundation 30 South Wells Suite 4049 Chicago, IL60606 36-4157233 Seder Family Foundation 30 South Wells Suite 4049 Chicago, IL60606	Supporting Foundation Supporting Foundation Supporting Foundation Supporting Foundation	IL IL	501(C)(3) 501(C)(3) 501(C)(3)	11A 11A	N/A N/A							

Form 990, Schedule R, Part II - Identification of Rela	ted Tax-Exempt O	rganizations					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Sectio	13) olled
						Yes	No
Seymour J Abrams Cheder Lubavitch Hebrew Day School Endowment Foundation	Supporting	IL	501(C)(3)	11A	N/A		No
30 South Wells Suite 4049 Chicago, IL60606 36-4421181	Foundation		,,,,		,		
Tamar & Jonathan Koschitzky Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 30-0149723	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
The Epstein Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 31-1529058	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
THe Robert and Yadelle Sklare Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4389423	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Terri & Steve Barnett Family Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3729382	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Weiss Memorial Hospital Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4413031	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Z Frank Camp Apachı Supporting Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3833108	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Wagner Descendant's Foundation							
30 South Wells Suite 4049 Chicago, IL60606 20-4004517	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Dor V'Dor Foundation							
30 South Wells Suite 4049 Chicago, IL60606 20-4599515	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Sisyphus Supporting Foundation							
30 South Wells Suite 4049 Chicago, IL60606 20-5944850	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Anıta and Rıchard Gılford Famıly Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-3729381	Supporting Foundation	IL	501(C)(3)	11A	N/A		No
Berliant Kahn Supporting Foundation							
30 South Wells Suite 4049 Chicago, IL60606 36-4428301	Supporting Foundation	IL	501(C)(3)	11A	N/A		No

cim projectional in the latest and in the latest												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Sectio (b)(contr organi	n 512 13) olled					
						Yes	No					
Eve and Stuart L Pinkert Family Charitable Foundation												
30 South Wells Suite 4049 Chicago, IL60606 36-7230842	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Joel and Barbara Stone Foundation												
30 South Wells Suite 4049 Chicago, IL60606 36-4420857	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Robert U & Roberta Goldman Family Foundation												
30 South Wells Suite 4049 Chicago, IL60606 20-3921714	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
Carol Lavin Bernick Family Supporting Foundation												
30 South Wells Suite 4049 Chicago, IL60606 36-4067510	Supporting Foundation	IL	501(C)(3)	11A	N/A		No					
JFMCP3 Corporation												
30 South Wells Suite 4049 Chicago, IL60606 26-2053862	Supporting Organization	IL	501(C)(3)	11A	N/A		No					

orm 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership					
George & Shirley Berliant Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-4443848	Charitable Remainder Unitrust	IL	N/A	Т		203,458	100 000 %					
Ladislaus L Braun Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-7009252	Charitable Remainder Annuity Trust	IL	N/A	Т		264,743	100 000 %					
Saramae Braun Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-3923372	Charitable Remainder Annuity Trust	IL	N/A	Т		240,159	100 000 %					
Adrienne and Arnold Brookstone Charitable Trust 30 South Wells Chicago, IL60606 36-7167154	Charitable Remainder Unitrust	IL	N/A	Т		161,470	100 000 %					
Gustav & Stefi S Geisel Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-6976689	Charitable Remainder Annuity Trust	IL	N/A	Т		49,280	100 000 %					
Maurice E Grosby Charitable Remainder Trust 30 South Wells Chicago, IL60606 20-7359948	Charitable Remainder Unitrust	IL	N/A	Т		2,038,837	100 000 %					
Herbert S Kamin Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-4233291	Charitable Remainder Unitrust	IL	N/A	Т		407,783	100 000 %					
Herbert S Kamın Charıtable Remaınder Unitrust #2 30 South Wells Chicago, IL60606 13-4336576	Charitable Remainder Unitrust	IL	N/A	Т		947,926	100 000 %					
Krengel Annuity Trust 30 South Wells Chicago, IL60606 36-3751169	Charitable Remainder Annuity Trust	IL	N/A	Т		536,962	100 000 %					
Buryl & Zelda Lazar Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-7184051	Charitable Remainder Annuity Trust	IL	N/A	Т		138,982	100 000 %					
Paul Leffman Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-7229556	Charitable Remainder Unitrust	IL	N/A	Т		500,157	100 000 %					
Jess LEvine Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-6975110	Charitable Remainder Unitrust	IL	N/A	Т		1,323,593	100 000 %					
Harold J Lilie Charitable Remainder Trust 30 South Wells Chicago, IL60606 26-6177004	Charitable Remainder Unitrust	IL	N/A	Т		1,622,450	100 000 %					
Isadore & Emma Meystel Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 35-1873695	Charitable Remainder Unitrust	IL	N/A	Т		56,210	100 000 %					
Henry S & Barbara J Moss Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-6978660	Charitable Remainder Annuity Trust	IL	N/A	Т		116,068	100 000 %					
Robert Naparsteck Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 20-3935186	Charitable Remainder Unitrust	IL	N/A	Т		79,202	100 000 %					
Rhodes Family Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-4216163	Charitable Remainder Unitrust	IL	N/A	Т		61,606	100 000 %					
Roth Charitable Remainder Trust 30 South Wells Chicago, IL60606 36-7230129	Charitable Remainder Unitrust	IL	N/A	Т		44,019	100 000 %					
Suzanne G Samuels Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-7186295	Charitable Remainder Unitrust	IL	N/A	Т		202,002	100 000 %					
Schwartzman Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-3751166	Charitable Remainder Annuity Trust	IL	N/A	Т		543,637	100 000 %					

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

Form 990, Schedule R, Part IV - Iden	itification of	Related Organiz	ations laxable a	as a Corporatio	n or Trust		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership
Marjorie Perlman Shafton Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-4009158	Charitable Remainder Unitrust	IL	N/A	Т		142,920	100 000 %
Shanoff Qualified Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-7426566	Charitable Remainder Unitrust	IL	N/A	Т		268,529	100 000 %
Shanoff Non-Qualified Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-7426567	Charitable Remainder Unitrust	IL	N/A	Т			100 000 %
Harry Shanoff Qualified Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-7426568	Charitable Remainder Unitrust	IL	N/A	Т		200,815	100 000 %
Marilyn Silkin Charitable Annuity Trust 30 South Wells Chicago, IL60606 36-7157133	Charitable Annuity Trust	IL	N/A	Т		291,602	100 000 %
Harriet E Stein Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 47-6236628	Charitable Remainder Unitrust	IL	N/A	Т		179,798	100 000 %
Barbara Anne Steinberg Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-3944513	Charitable Remainder Unitrust	IL	N/A	Т		821,194	100 000 %
Jack Steinberg Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-3944515	Charitable Remainder Unitrust	IL	N/A	Т		821,194	100 000 %
Tauman Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-7229196	Charitable Remainder Unitrust	IL	N/A	Т		1,628,476	100 000 %
Gertrude Kramer Witkin Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 36-6998224	Charitable Remainder Unitrust	IL	N/A	Т		59,686	100 000 %
Wolf Family Charitable Remainder Trust 30 South Wells Chicago, IL60606 26-6660057	Charitable Remainder Annuity Trust	IL	N/A	Т		1,967,295	100 000 %
Gustav & Stefi S Giesel Charitable Remainder Annuity Trust 30 South Wells Chicago, IL60606 36-6943106	Charitable Remainder Annuity Trust	IL	N/A	Т		27,726	100 000 %
Joseph Burns Charitable Remainder Unitrust 30 South Wells Chicago, IL60606 26-6748959	Charitable Remainder Unitrust	IL	N/A	Т		344,941	100 000 %

Software ID: Software Version:

EIN: 36-2167761

Name: Jewish Federation of Metropolitan Chicago

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		tion (that a	(che				(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Steven B Nasatır Presıdent	37 50			Х				79,622	451,191	111,655	
David Brief Chief Investment Officer	37 50				х			0	407,604	22,573	
Michael Tarnoff Executive Vice President - CFO	37 50			х				125,910	188,864	25,207	
David Rosen Senior Vice President - Endowments	37 50			х				285,238	0	117,570	
Jeffrey L Cohen Senior VP - Finan Resource Develop	37 50			х				105,864	158,795	166,790	
Michael C Kotzin Executive Vice President	37 50			х				0	259,301	67,713	
Peter Friedman Executive Vice President	37 50			х				0	201,928	87,751	
Reis Kayser Exec Dir - JFMC Facilities Corp	37 50					Х		0	196,660	42,310	
Louis Lazovsky Vice President - Human Resources	37 50				х			19,460	175,142	87,348	
Joseph Salcık VP - Information Systems & Services	37 50				х			18,602	167,424	39,566	
Jay Tcath Senior VP - Public Affairs	37 50			х				16,471	166,549	36,330	
Beth Cherner Vice President - Campaign	37 50			х				0	182,759	96,584	
James A Pinkston Vice President - Accounting	37 50			х				22,352	156,468	20,432	
Rachel Sternberg Chief of Staff	37 50					х		0	159,322	17,959	
Robert Schuckman Assoc VP - Gift Planning	37 50					х		153,282	0	50,385	
James Rosenberg VP - Financial Resource Devolopment	37 50					Х		51,510	95,661	14,513	
Susan Rifas Vice President - Board Operations	37 50			х				0	141,933	88,634	
Peter Chiswick Controller	37 50			х				0	141,466	45,832	
Joel Poupko Judaic Scholar	37 50					Х		138,295	0	13,986	
Max Schrayer Chairman	20 00	Х		х				0	0	0	
Wendy Abrams Vice Chairman	10 00	Х		х				0	0	0	
Debbie L Berman Vice Chairman	10 00	х		х				0	0	0	
David T Brown Vice Chairman	10 00	Х		х				0	0	0	
Ethan Budin Vice Chairman	10 00	Х		х				0	0	0	
Lawrence E Glick Vice Chairman	10 00	х		х				0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A)	(B)	D.s.s.	((C)	عياه			(D)	(E)	(F)
Name and Title	A verage hours		tion (:hat a			II		Reportable compensation	Reportable compensation	Estimated amount of other
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Lısa Rubınsteın Dırector	1 00	Х						0	0	0
Deborah Rudy Dırector	1 00	Х						0	0	0
Marc Sacks Dırector	1 00	Х						0	0	0
Mıdge Perlman Shafton Dırector	1 00	Х						0	0	0
Rabbı Danıel Sherbill Director	1 00	Х						0	0	0
David A Sherman Director	1 00	Х						0	0	0
Morris Silverman Director	1 00	Х						0	0	0
Barbara Kaplan Slutsky Dırector	1 00	Х						0	0	0
Alan P Solow Dırector	1 00	Х						0	0	0
Marc Spellman Dırector	1 00	Х						0	0	0
Sara C Star Dırector	1 00	Х						0	0	0
Nına G Stillman Dırector	1 00	Х						0	0	0
David Stone Director	1 00	Х						0	0	0
Pam F Szokol Dırector	1 00	Х						0	0	0
Phyllis Tabachnick Director	1 00	Х						0	0	0
Dr Yosef Walder Dırector	1 00	Х						0	0	0
Herbert S Wander Dırector	1 00	Х						0	0	0
Ralph Wanger Dırector	1 00	Х						0	0	0
Dr Michele Sackheim Wein Director	1 00	Х						0	0	0
A vrum Weinfeld Director	1 00	Х						0	0	0
Rhonda Wener Dırector	1 00	Х						0	0	0
Rıchard L Wexler Dırector	1 00	Х						0	0	0
A dam Winick Director	1 00	Х						0	0	0
James R Woldenberg Dırector	1 00	Х						0	0	0
Rabbı Carl Wolkın Dırector	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A)	(B)		((C)				(D)	(E)	(F)
Name and Title	A verage hours		tion ((che				Reportable compensation	Reportable compensation	Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Dana Gordon Dırector	1 00	Х						0	0	0
Arnie Harris Director	1 00	Х						0	0	0
Ellen Spıra Hattenbach Dırector	1 00	Х						0	0	0
Andrew S Hochberg Dırector	1 00	Х						0	0	0
Nettie Isenberg Director	1 00	Х						0	0	0
Bennett E Kaplan Dırector	1 00	Х						0	0	0
Cındy Kaplan Dırector	1 00	Х						0	0	0
Penny Keeshin Director	1 00	Х						0	0	0
Peter Kupferberg Dırector	1 00	Х						0	0	0
Jane Cadden Lederman Dırector	1 00	Х						0	0	0
Jennifer Levine Director	1 00	Х						0	0	0
Francine F Levy Director	1 00	Х						0	0	0
Kım R Levy Dırector	1 00	Х						0	0	0
Mırıam Lıchstein Director	1 00	Х						0	0	0
Barry A Malkın Dırector	1 00	Х						0	0	0
Trisha S Margulies Director	1 00	Х						0	0	0
Rabbı Steven S Mason Dırector	1 00	Х						0	0	0
Hon Sıdney H Mathıas Dırector	1 00	Х						0	0	0
Adrienne Meisel Director	1 00	Х						0	0	0
Lee I Miller Director	1 00	Х						0	0	0
Steven N Miller Director	1 00	Х						0	0	0
Jodı Newmark Dırector	1 00	Х						0	0	0
Sanford E Perl Dırector	1 00	Х						0	0	0
Steven Podolsky Dırector	1 00	Х						0	0	0
Eric Rothner Director	1 00	х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours	Posi	tion (that a	(che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Scott J Heyman Vice Chairman	10 00	×		х				0	0	0
John A Lowenstein Vice Chairman	10 00	х		х				0	0	0
Stephen Malkin	10.00			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\vdash				0	
Vice Chairman	10 00	Х		Х	<u> </u>			0	0	0
Theodore Perlman Vice Chairman	10 00	×		Х				0	0	0
Keith J Shapiro	10 00	Х		Х				0	0	0
Vice Chairman Wendy Berger Shapiro VIce Chairman	10 00	Х		Х	\vdash			0	0	0
Bill Silverstein	10.00			×	\vdash			0	0	
Vice Chairman	10 00	X		_ X	₩			0	0	0
Harry Seigle Treasurer	10 00	X		Х				0	0	0
Rıchard C Goodman Assıstant Treasurer	10 00	Х		х				0	0	0
Ann-Louise Kleper Secretary	10 00	х		х				0	0	0
Dr Jeffrey Kopin Assistant Secretary	10 00	Х		х				0	0	0
Caryn Rosen Adelman Director	1 00	Х						0	0	0
Stephen R Ballıs Dırector	1 00	Х						0	0	0
Peter J Barack Director	1 00	х						0	0	0
David A Baum Director	1 00	Х						0	0	0
Jodie Berkman Director	1 00	Х						0	0	0
Hon Arthur L Berman Director	1 00	Х						0	0	0
Marc L Berman Director	1 00	Х						0	0	0
Dennis Carlin Director	1 00	Х						0	0	0
Rosanne Diamond Director	1 00	Х						0	0	0
Maury Fertig Director	1 00	Х						0	0	0
Linda Schottenstein Fisher Director	1 00	Х						0	0	0
Edward A Fox Director	1 00	Х						0	0	0
Stuart Frankenthal Director	1 00	Х						0	0	0
Jım Gınsburg Dırector	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	ched		II		(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
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
Mıchael Zaransky Dırector	1 00	Х						0	0	0
Deanna Drucker Ex-Officio	1 00	Х						0	0	0
A drienne Kriezelman Ex-O fficio	1 00	Х						0	0	0
Debbie Winick Ex-Officio	1 00	Х						0	0	0
Jennifer Leemis Ex-Officio	1 00	Х						0	0	0
Justin Brown Ex-Officio	1 00	Х						0	0	0