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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

2011 Open to Public

Inspection

B Check if a Address o Name cha Initial retu Terminate Amended Applicatio	of treatment to the calendar year, or tax year beginning and ending the calendar year, or tax year beginning the calendar year.	ng		, 20
Address of			D Employ	er identification number
			52-1249	913
☐ Name cha	nge Number and street (or P O box if mail is not delivered to street address) Room/si	uite	E Telepho	one number
i 🗌 Initial retu	n 101 West Mount Royal Avenue		410-727	-4828
☐ Terminate				
Amended			G Gross r	eceipts \$ 5,301,399
_				
	n pending	1		for affiliates? Yes No
	▼ 524×29	H(b) Are all		
i Tax-exem				list (see instructions)
J Website			exemption	number 🕨
	ganization ☐ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form	nation 1987	M State	of legal domicile MD
Part I	Summary			
1 6	Briefly describe the organization's mission or most significant activities:	-	-	•
. 7	he Foundation was created to carry out the charitable, educational and rel	ligious purpo	ses of T	he Associated:
ğ İ	ewish Community Federation of Baltimore, Inc. (The Associated). The Fo			
E G	haritable organizations in furtherance of the mission of The Associated.		miner Bill	
2 2	Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25%	of ite not accore		••••••
			3	-
e5 3 1				
9 4	lumber of independent voting members of the governing body (Part VI, line 1b)		4	
₹ 5 ·			5	(
₽ 6 7	otal number of volunteers (estimate if necessary)		6	
` 7a]	otal unrelated business revenue from Part VIII, column (C), line 12		7a	
_ b 1	let unrelated business taxable income from Form 990-T, line 34		7b	
		Prior Yea	r	Current Year
_a 8 (Contributions and grants (Part VIII, line 1h)		70,750	117,650
Ž 9 F	rogram service revenue (Part VIII, line 2g)			0
Ψ Ι	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	3,	23,956	414,343
11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		23,730	717,575
ī			24.706	524.000
	otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		94,706	531,993
	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,0	95,936	909,617
	enefits paid to or for members (Part IX, column (A), line 4)			
ဖ္တ 15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			(
≝ 16a F	rofessional fundraising fees (Part IX, column (A), line 11e)			(
15 S 16a F 1	otal fundraising expenses (Part IX, column (D), line 25) ▶			
^{யி} <u>4</u> ஜ்ர (Other expenses (Part IX, column (A), lines_11a=11d, 11f=24e)	10	05,649	126,683
5	otal expenses. Add lines 13–17 (must equal Pate & Folume A) line 25)		01,585	1,036,300
19 F	evenue less expenses. Subtract line 18 from line 12		06,879)	
		Beginning of Curi		(504,307 End of Year
	171 67 2012 101			
	otal assets (Part X, line 16) 15 JUL 3 U 2014 15 .	15,0	75,475	14,161,397
[e] ₹	otal habilities (Falt X, III C 20) [. 3		0	
원 22 N	let assets or fund balances. Subtract line 21(from line 20) ԼՄ	15,6	75,475	14,161,3 97
	Signature Block			
Part il			best of m	v knowledge and belief it i
Part il	es of perjury, I declare that Lhave examined this return, including accompanying schedules and state	ments, and to the		,,,
Part il	es of perjury, I declare that I have examined this return, including accompanying schedules and state and complete. Declaration of oreparer (other than officer) is based on all information of which prepare	ments, and to the r has any knowled	dge /	
Part il	es of perjury, I declare that I have examined this return, including accompanying schedules and state and complete. Declaration of preparer (other than officer) is based on all information of which prepare	r has any knowled	ige	7/12
Part il Underpenalte true, correct,	and complete Declaration of preparer (other than officer) is based on all information of which prepare	r has any knowled	1ge 7/2	5/12
Underpenaltic true, correct, a	Signature of officer	r has any knowled	1ge 7/2	5/12
Part il Underpenaltie true, correct, a	Signature of officer Marc B. Terrill President	r has any knowled	1ge 7/2	5/12
Underpenaltic true, correct, a	Signature of officer Marc B. Terrill Type or print name and title	r has any knowled	1ge 7/2	5/12
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Undergenalty true, Frect, S Sign D Here	Signature of officer Marc B. Terrill Type or print name and title	Date	Check	_ I II
Part II Underpenaltic true, correct,	Signature of officer Marc B. Terrill Type or print name and title Print/Type preparer's name Preparer's signature Da	Thas any knowled Date	Check self-emples EIN ▶	
Part il Unde Penalti true, Greet, s Sign D Here Paid Preparer Use Only	Signature of officer Marc B. Terrill Type or print name and title Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's name	Date	Check self-emples EIN ▶	

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Page	Z

Part				
1	Check if Schedule O contains a Briefly describe the organization's miss	response to any question in this l	Part III	· 🗖
•	The Foundation was created to carry Jewish Community Federation of Bal	out the charitable, educational at timore, Inc. (The Associated). T	he Foundation makes grants to pu	ciated: ıblıc
	charitable organizations in furtherance	e of the mission of The Associat	ed.	
2	Did the organization undertake any sign prior Form 990 or 990-EZ?		e year which were not listed on the	☐ Yes ☒ No
3	If "Yes," describe these new services of Did the organization cease conducting	ig, or make significant changes	in how it conducts, any program	_
	services?			☐ Yes ဩ No
4	Describe the organization's program se expenses. Section 501(c)(3) and 501(c) grants and allocations to others, the tot	ervice accomplishments for each o	47(a)(1) trusts are required to repor	as measured by t the amount of
4a	(Code:) (Expenses \$	including grants of \$	909,617) (Revenue \$)
4b	(Code:) (Expenses \$) (Revenue \$	
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe in Sch	nedule ()		
	(Expenses \$ including g	rants of \$) (Rever	nue \$)	
4e	Total program service expenses ▶	0		

Part	IV Checklist of Required Schedules			
-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			3,7
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	-		^
	Part III	5	l	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>			
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	8		X
9	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	10		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		$\frac{\Lambda}{X}$
f		11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
h	Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		X
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	The state of the s	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III			
20 a		19 20a	-	$\frac{X}{X}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		x
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a`	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a discussified passed during the year? If "Year" constitute to Charles to Port I.	24d		
b	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
26	If "Yes," complete Schedule L, Part I	25b 26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X X
С	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		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	Х	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	35a 35b		<u>х</u> х
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	x	

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V 1a Enter the number reported in Box 3 of Form 1086. Enter 0- if not applicable b Enter the number of Forms W-26 included in line 1a Enter 0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return? Note. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have annually gross flower or the year of the year of the year of year of the organization and year of the organization and year of the organization and year of the year of year of the year of year of year of the year of yea	Form 99	00 (2011)			Page
a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-26 included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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? Note. If the sum of lines 1 and 2a is greater fhan 250, you may be required to e- file (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If If 4 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 accounts in a foreign country (such as a bank account, securities account, or other financial accounts in a foreign country (such as a bank account, securities account, or other financial accounts account)? 5b If "Yes," enter the name of the foreign country. ► 5c See instructions for filing requirements for Form TD F 90-221. Report of Foreign Bank and Financial Accounts 5c Was the organization approach to a prohibited tax shelter transaction? 5c If "Yes," of the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c If "Yes," of the organization receive approach to the payor? 5c If "Yes," of the organization entire the very solicitation an express statement that such contributions or gifts were not tax deductible? 5c If "Yes," of the organization receive a payment in excess of \$75 made party as a contribution and party for go	Part	V Statements Regarding Other IRS Filings and Tax Compliance			Ť
a Enter the number of Forms W-2G included in line 1s. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1s. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the catendar year ending with or within the year covered by this return 2a 2b 1f at least one is reported on line 2a, did the organization file all required deteral 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) 3d Did the organization all the organization in American accounts b If 'Yes,' has it filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O 4 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: ▶ 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b If 'Yes,' enter the name of the foreign country: ▶ 5a Was the organization have annuel gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7b If 'Yes,' did the organization file Form 8888-T? 6a Does the organization have annuel gross receipts that are normally greater than \$100,000, and did the organizations oslicit any contributions that were not tax deductible? 7c If 'Yes,' did the organization file Form 8888-T? 6a Did the organization receive a payment in excess of \$75 made parily as a contribution and partly for goods and services provided to the payor? 7a If 'Yes,' did the organization with were not tax deductible? 7b If 'Yes, did the organization make an interest or indirectly, to pay premiums on a personal benefit contract? 7c If 'Yes,' did the organization make an int		Check if Schedule O contains a response to any question in this Part V	<u> </u>		<u>. [</u>
b Enter the number of Forms W-26 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? 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, our may be required to e-file (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 5b. If 'Yes, has tifled a Form 990-1 for this year? If 'No, 'provide an explanation in Schedule O. 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: Incomplete the second of the organization and account, or other financial account)? b If 'Yes, 'in line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization flat if was or is a party to a prohibited tax shelter transaction? If 'Yes,' to line 5a or 5b, did the organization flat if was or is a party to a prohibited tax shelter transaction? If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 1 If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 1 If 'Yes,' indicate the number of Forms 8382 filed during the year, year year year year year year year year	4	5. 4		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable parming (ambling) winnings to prize winners? 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 of the state of the calendar year ending with or within the year covered by this return of the state of the calendar year ending with or within the year covered by this return of the state of the state of the organization for on line 2a, did the organization feel are quired 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) If I'ves, has it filed a Form 990-f for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, dot the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; IP See instructions for filing requirements for Form TD Fe0-22.1, Report of Foreign Bank and Financial Accounts account; I'ves, enter the name of the foreign country; IP See instructions for filing requirements for Form TD Fe0-22.1, Report of Foreign Bank and Financial Accounts account; If I'ves, in the same of the foreign country; IP See instructions for filing requirements for Form TD Fe0-22.1, Report of Foreign Bank and Financial Accounts account; If I'ves, in the same of the foreign country; IP See instructions for filing requirements for Form TD Fe0-22.1, Report of Foreign Bank and Financial Accounts account; If I'ves, in the same of the foreign country; IP See instructions of filing f	_	· · · · · · · · · · · · · · · · · · ·	- '-55	٠,	
reportable gaming (gambling) winnings to prize winners? 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 I and 2a is greater than 250, you may be required to e-file (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 5c If "Yes," has if filed a Form 990-T for this year? If "No." Provide an explanation in Schedule 0 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country, such as a bank account, securities account, or other financial account;? b If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization file form 8886-T? 5c Does the organization above annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," indicate the number of Forms 8282 filed during the year and services provided? 6c Did the organization selled the payor? 6c Did the organization selled the payor? 6c Did the organization selled the payor? 6c Did the organization selled the payor and services provided to the payor? 6c Did the organization selled the payor and services provided? 6c Did the o		· · · · · · · · · · · · · · · · · · ·	4.		ŀ
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the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year? .

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

14b

13b

13c

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O Check if Schedule O contains a response to any question in this Part VI	See in	struci	ions
Secti	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		*	
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		j	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C)
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		X
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	<u>:: 34</u>		لضت
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12b	X	
13	Did the organization have a written whistleblower policy?	12c	Λ.	X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		黄	
а	The organization's CEO, Executive Director, or top management official	15a	74.1	X
b	Other officers or key employees of the organization	15b		X
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	5#		4
b	with a taxable entity during the year?	16a		X
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c	;)(3)s	only)
19	Own website Another's website Violenter Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Marilyn Loux 101 West Mount Royal Avenue Baltimore, MD 21201 410-727-4828	of the		

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Page 7

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box, office individua	unles	Pos neck ss pe	rson	than of the state	n an	(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
(1) Marc B. Terrill								-		
President	1.0	X		\mathbf{X}_{j}				0	501,678	37,917
(2) Richard L. Pearlstone										
Vice President	1.0	X		X				0	0	0
(3) P. Justin Pearlstone										
Vice President	1.0	X	L	X				0	0	0
(4) Eugene Schreiber										
Secretary/Treasurer	1.0	X		X				0	0	0
(5) Amy Elias										
Director	1.0	X						0	0	0
(6) Josh Fidler]								
Director	1.0	X,		L.,				0	0	0
(7) Darrell D. Friedman]									
Director	1.0	X						0	0	0
(8)										
(9)								,		
(10)		:								
(11)										
(12)										
(13)										
(14)										

,Part	VII Section A. Officers, Directors, Trus	stees, Key	Empl	oye		-	High	est	Compensated	Employees (continue	1)
	(A) Name and title	(B) Average hours per week	Position not check more than ounless person is bother and a director/trust				n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other	
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI	SC)	compensation from the organization and related organizations
(15)											- 	
(16)								-				
(17)												
(18)		-				-						
								-				
											-	
	,			_								· · · · · · · · · · · · · · · · · · ·
(25)						Ì						
1b	Sub-total				· ·	 		A	0	501,6	78	37,917
<u>d</u>	Total (and Base Abased As)		<u>.</u> .					>	0	501,6		37,917
	reportable compensation from the organi		1 10 111				above	;) W	no received mo	ore (nan \$100		
3	Did the organization list any former of employee on line 1a? If "Yes," complete s							mp	loyee, or high	est compens	sated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	portat	ole d	com	per	nsatio					3 X
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indiv	/idual	4 X 5 X
Section	on B. Independent Contractors		, o, , , , ,	0.0			1001		- Person	· · ·	··	3 A
1	Complete this table for your five highest of compensation from the organization Rep year.											
	(A) Name and business add	ress					·		(B) Description of se	ervices	Com	(C) ipensation
None												
											- 1-	
	Total number of independent contracts	ro (in alcodi-			- ·	!#		4L	ann linkad at a			
2	Total number of independent contractor received more than \$100.000 of compens	•	-					ın	use listed abo	ve) wno	*	

Par	t VIII	Statement of Rev	/enue					
	谗		. 150 - 45		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
and the same		Francisco San San San	<u> → ₹ - ₹/- ∰/4</u>	· j	1	function revenue	revenue	under sections 512, 513, or 514
Grants	1a	Federated campaigns			3 8	. 6	1 230	*
Gra	b	Membership dues .	<u>1b</u>		\ \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	*	7 %%	
AT AT	С	Fundraising events .	-]. < & & *#	. And wis	1 19 mm 13	Miller with the
Gifts, ilar An	d	Related organizations			\ ,	* *		
ns, Sim	е	Government grants (cor		ļ	* · · · · · · · · · · · · · · · · · · ·	** ## 4°	. · · * · · · · · · · · · · · · · · · ·	* * * * * * * * * * * * * * * * * * *
atio er (†	All other contributions, g					in the second	CO. AND
ë Đ		and similar amounts not inc		117,650				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions includ	="		117.650	***	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Contract of the second
	h	Total. Add lines 1a-1	<u> </u>	Business Code	117,650	i i	ANTON AND	A chellenger
Program Service Revenue	2a			Dusiness Code		P423	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Še	h			-				
Se				-				
ē	d		•••	_	-		-	
SE	e			-				
Ē	f	All other program sen	vice revenue .					
P	g	Total. Add lines 2a-2		. ▶	0		Half Carlo	
	3	Investment income		lends, interest,			25 25 000022	
		and other similar amo	ounts)	•	149,870			<u> </u>
	4	Income from investment	t of tax-exempt b	ond proceeds ►	_			
	5	Royalties		<u> ▶</u>				
			(i) Real	(iı) Personal		Prof. Francisco		AND
	6a	Gross rents				A. Lar. Marie		
	b	Less: rental expenses		-		e gjë e		
	C	Rental income or (loss)		0		n de ce c	32	
	d 7a	Net rental income or (Gross amount from sales of	(IOSS) (i) Securities	(ii) Other	U V	River State of the control		7 7 m 7
	/ a	assets other than inventory	5,033,879			\$ 10 mm.		
	b	Less cost or other basis	3,033,679					
	~	and sales expenses	4,769,406			· · · · · · · · · · · · · · · · · · ·		
	С	Gain or (loss) .	264,473			· · · ·		
	d	Net gain or (loss)			264,473			
_		• • • •				·		AS CONTRACT AND
nue	8a	Gross income from fu	ındraising					
, e		events (not including \$				Bris de A.		
Other Reven		of contributions reported	•					
her		'μ	···a					Responding to the second
ŏ	b	Less: direct expenses		L .	3 54			
	C	Net income or (loss) for Gross income from ga		events . ►	. 0		*_	·
	9a		_		is a		1334000	
	ь	Less: direct expenses	-	!			A SALE STA	4
	C	Net income or (loss) fi		1	0	<u> </u>	3 3542. 2	
	10a					*	Chara Gara	3. · · · · · · · · · · · · · · · · · · ·
		returns and allowance						1
	b	Less: cost of goods s	old b			· •	19 mar 19 19	
	С	Net income or (loss) fa		entory ►	0			
Ì		Miscellaneous R	evenue	Business Code			, , ,	
	11a							
	b							
	C	A 12 41						
	d	All other revenue .		L				
	е 12	Total. Add lines 11a- Total revenue. See in			531,993	•		
	14	iounievenue. See If	เอเเนษแบบจี		1 331,9931			İ

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respor		in this Part IX .		🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	909,617	909,617		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	707,021	, , , , , , , , , , , , , , , , , , , ,		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10 11	Other employee benefits				
a b c	Management				
d e f	Lobbying	126,683		126,683	
g 12 13	Other				
14 15	Information technology				
16 17 18	Occupancy				
19 20 21	Conferences, conventions, and meetings Interest Payments to affiliates				
22 23	Depreciation, depletion, and amortization				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b c d					
e 25	All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,036,300	909,617	126,683	
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

	n 990 (2 art X				Page 11
2		Bulance circut	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	490,033	2	945,037
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	F. 18 . 79
ts	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ą	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities	15,185,442	11	13,216,360
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	15,675,475	16	14,161,397
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
٠	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	AP (1)	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	-	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X			
	20	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
seo		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.		* · · · · · · · · · · · · · · · · · · ·	
lan	27	Unrestricted net assets	15,675,475	27	14,161,397
Ba	28	Temporarily restricted net assets		28	
Fund Balances	29	Permanently restricted net assets . Organizations that do not follow SFAS 117, check here ▶ □ and		29	
ō		complete lines 30 through 34.	· · · · · · · · · · · · · · · · · · ·	***************************************	**. 3% 5, 64 - 15 * - 15 - 4
Net Assets or	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
it /	32	Retained earnings, endowment, accumulated income, or other funds.	45 (75 475	32	414465
ž	33 34	Total liabilities and not assets/fund balances		33	14,161,397
	34	Total liabilities and net assets/fund balances	15,675,475	34	14,161,397

	<u> </u>				J- '-
Par					
	Check if Schedule O contains a response to any question in this Part XI	•			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		531	1,993
2	Total expenses (must equal Part IX, column (A), line 25)	2			5,300
3	Revenue less expenses. Subtract line 2 from line 1	3			, 307)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1.	o	5,475
5	Other changes in net assets or fund balances (explain in Schedule O)	5			,771)
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	14	4,161	1,397
Part	XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🛛 Cash 🗌 Accrual 🔲 Other		074	i. 98	£.,
	If the organization changed its method of accounting from a prior year or checked "Other," exp	laın in	2	382	ž .
	Schedule O		¥ 5	12.7	À.F
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		<u>X</u> _
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, exp			7857	
	Schedule O.				- 5
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	r were			
_	issued on a separate basis, consolidated basis, or both			- 1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			43	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in			
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	go the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dıts	3b	- 1	
			Form	990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization Employer identification number Pearlstone Family Fund, Inc. 52-1249913 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III–Functionally integrated e 🗵 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (j) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) 11g(ii (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of in col (i) listed in your organization (described on lines 1-9 the organization in organizátion in col support governing document? col (i) of your (i) organized in the above or IRC section support? US? (see instructions)) Yes No Yes Nο (A) The Associated Jewish 52-0607957 9 X X X 625,085 Community Fed. Balto (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2011

625,085

Dord	Cumport Cabadula for Organia	etiene Dece	ibad in Caat	470/b\/	4)/4)/:	470/5//4//4	/
Part	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	organization	failed to qua	
Casti	Part III. If the organization fails to	o quality unde	er the tests iis	tea below, pi	ease complet	e Paπ III.)	
	on A. Public Support	1 () 0007		4 1 2 2 2 2	1 1 1 2 2 4 2		
_	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	F5.1988	444	Mary "To Call"	la collection		
	on B. Total Support		,				
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).						
11 12	Gross receipts from related activities, etc		ns)			12	
13 	First five years. If the Form 990 is for the organization, check this box and stop he	re					501(c)(3) . ► □
<u>Secti</u>	on C. Computation of Public Suppo						
14	Public support percentage for 2011 (line 6		•			14	%
15 16a	Public support percentage from 2010 Sch 331/3% support test—2011. If the organi	zation did not	check the box	on line 13, and		_ 15	eck this
	box and stop here. The organization qua	•		•			. ▶ 🗀
b	331/3% support test—2010. If the organ check this box and stop here. The organ					15 is 33¹ß% (or more, . ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts-a	nd-circumstan	ces" test, chec	k this box and	stop here. Ex	oplain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization or supported organization is supported organization.	tion meets the	"facts-and-circ	cumstances" te	est, check this	box and sto	p here.
18	Private foundation. If the organization di	d not check a t	oox on line 13,	16a, 16b, 17a,	or 17b, check	this box and se	

20

Part	(Complete only if you checked the	e box on line	9 of Part I or	if the organi	zation failed t	•	r Part II.
	If the organization fails to qualify	under the tes	sts listed belo	w, please co	mplete Part II	.)	
	on A. Public Support	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2007	(b) 2008	(0) 2009	(u) 2010	(e) 2011	(I) I Olai
•	received. (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the		;				
_	organization without charge				-		
6 7a	Total. Add lines 1 through 5	ļ .					
<i>1</i> a	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000				1		
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	一路機	A A A A A A A A A A A A A A A A A A A	15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	line 6.)	A STATE OF THE STA	789.2				
	on B. Total Support	(-) 0007	4.0000	(-) 0000	(1) 0040	4.7.0044	(0.Tatal
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	<u> </u>				·	
10a	Gross income from interest, dividends, payments received on securities loans, rents,				1		
	royalties and income from similar sources						
ь	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	-					
11	Net income from unrelated business	-		•			
	activities not included in line 10b, whether]		
	or not the business is regularly carried on						
12	Other income Do not include gain or		1		l		
	loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,	NO THE RE				* 120 E P 10 E 10 E 10 E 10 E 10 E 10 E 10 E	
15	and 12.)		*				
14	First five years. If the Form 990 is for the organization, check this box and stop he	_	-		-	r as a section	` ' ' . '
Secti	on C. Computation of Public Suppor	t Percentage	e				
15	Public support percentage for 2011 (line 8	, column (f) di	vided by line 13	3, column (f))		15	%
16	Public support percentage from 2010 Sch			<u></u>	<u></u>	16	%
	on D. Computation of Investment Inc			,,		1	
17	Investment income percentage for 2011 (17	%
18	investment income percentage from 2010 331/3% support tests—2011. If the organ					18 oro than 331n%	%
19a	17 is not more than 3318%, check this box a						
b	33½% support tests—2010. If the organization 18 is not more than 33½%, check this b	zation did not c	heck a box on I	ine 14 or line 1	19a, and line 16	is more than 33	11/3%, and

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

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open to Public Inspection

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

Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II **Employer identification number** ⊠ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 52-1249913 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Pearlstone Family Fund. Inc. Name of the organization Part II Partl

%

(h) Purpose of grant or assistance 6 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable can be duplicated if additional space is needed . (p) EIN 1 (a) Name and address of organization or government (1) Attachment #1 **£** (11) 3 9 9 9 8 6 10 2

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

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information Grant requests are reviewed for consistency with the mission and purposes of the Foundation and the Supported Organization and to determine (e) Method of valuation (book, FMV, appraisal, other) The Foundation will request and receive periodic reports from the grantee giving updates as to how the grant money was utilized that the making of a grant to the grantee organization will not violate any applicable law or Internal Revenue regulation. (d) Amount of non-cash assistance The Foundation Board will use this information when considering future grant requests from the grantee. (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Part IV Part III S 9 က 4

SCHEDULE J (Form 990)

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Pearlstone Family Fund, Inc.

Employer identification number

52-1249913

art	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.		¥,	,
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use		*	- 16
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
			17.77	13.4
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			- 4
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
	•	1 2	\$ Ab	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the	~		
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			23
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III.			
	☐ Compensation committee ☐ Written employment contract	1	3	
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee	34	 *	
			¥.	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a	Silah	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	1	R.	73.7
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		2	
	compensation contingent on the revenues of:	To the		
а	The organization?	5a	-	<u>X</u>
b	Any related organization?	5b	#83×··	X
_	If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
6	compensation contingent on the net earnings of:	24		
а	The organization?	6a		X
	Any related organization?	6b		$\frac{X}{X}$
~	If "Yes" to line 6a or 6b, describe in Part III.	14.311	W 7: *	<u> </u>
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	23852000	<u> </u>	*
-	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	1	-	
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	ا و ا	- 1	

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

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

NOTE: THE SULLING SOLUTION COLUMN TO EACH INSECTION OF EACH INSECTION OF THE TRANSPORT OF T	200	CI IIsteu IIIdividual III	ust equal life total all	DUIL OF FOILI 990, FR	IT VII, SECTION A, IITIE	ia, applicable colum	n (U) and (E) amount	is for that individual
		(B) Breakdown c	of W-2 and/or 1099-MI	SC compensation	(C) Retirement and	aldexatooN (O)	(E) Total of columns	(E) Componention
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D-()(B)	reported as deferred in prior Form 990
	ε							
1 Marc B. Terrill	(E)	416,259	75,000	10,419	008,6	29,714	541.192	0
	(E)							
2 Darrell D. Friedman	(ii)				131,865		131,865	0
	(ı)							
3	(E)							
	€							
4	(ii)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	()							
5	(E)				1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(6)							
9	(ii)			1		3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
	(I)							
7	(ii)							
	(i)							
88	€							
	(1)							
6	(ii)							
	(1)							
10	(ii)					1 4 4 4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
	€							
11	€							
	€							
12	€							
	€							
13	€							
	€							
14	€					1 1 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		
	€							
15								
	€ !							
16	Ξ							

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011
la 팀
The Directors of the Pearlstone Family Fund, Inc. receive no compensation for their services. However one of the Directors
is employed by the supported entity, The Associated: Jewish Community Federation of Baltimore, Inc. (The Associated).
All of the compensation and benefits listed are paid by The Associated, none of 1t is attributed to the service as a Director
and/or Officer of the Foundation.
Payment to Darrell D. Friedman, a former employee of The Associated: Jewish Community Federation of Baltimore, Inc.,
in the amount of \$131,865 was paid in 2011 under the deferred compensation agreement in place on December 31, 2003.
Schedule J (Form 990) 20

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Pearlstone Family Fund, Inc.	Employer identification number 52-1249913
Form 990 Part VI, Section A,	
Line 2 - There are family relationships among the Donor Members and Directors. Rich	ard L. Pearlstone, Amy Elias and
P. Justin Pearlstone have a family relationship.	•••••
Line 6 - The organization has two members, a Public Member- The Associated: Jewish (Community Federation of
Baltimore, Inc. and Donor Member consisting of Richard L. Pearlstone.	
Line 7a - The members appoint the Board of Directors. The Public Member appoints t	he majority and the
Donor Members appoint the remainder.	
Line 7b - Amendments to the Bylaws must be ratified by the Member before they are ac	lopted.
Line 11a - The Form 990 and supporting schedules are distributed to the officers and di	rectors upon
completion for review prior to filing.	
Form 990 Part VI, Section B,	
Line 12c - The supported organization monitors and enforces compliance of the conflic	t of interest policy
by regularly reviewing the Board of Directors, its actions and the investment of assets to en	sure that it complies
with the conflict of interest policy.	·····
Line 19 - The organization makes its governing documents, conflict of interest policy an	d financial statements
available to the public upon request.	
Form 990 Part XI,	
Line 5 - Other changes in net assets or fund balance is comprised of net unrealized gains	s/losses.
	·

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Pearlstone Family Fund, Inc.

Part

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions. ▶ Attach to Form 990. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Open to Public 20

OMB No 1545-0047

Employer Identification number Inspection

52-1249913

(a) Name, address, and EIN of disregarded entity	(b) Prmary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(6)					
(4)					
(5)					
(9)					
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	omplete if the organization ax year.)	inswered "Yes" to	Form 990, Part	IV, line 34 becau	se it had
(a) Name, address, and EIN of related organization Prime	(b) (c) (c) Primary activity or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity?
				-	Yes No
The Associated: Jewish Community Federation of Baltimore, Inc. 101 W. Mt. Royal Avenue Baltimore, MD 21201	Fundraising	501(c)(3)	6	N/A	×
(2)					
(3)					
(4)					
(5)					
(9)					
(2)					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.				Schedule	Schedule R (Form 990) 2011

Schedule R (Form 990) 2011	2011									Page 2
Part III Identi	Identification of Related Organizations Taxable because it had one or more related organizations to	tions Tay organizati	cable as a Part ons treated as	as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 reated as a partnership during the tax year.)	e if the orgar ig the tax yea	iization ansv ar.)	vered "Yes"	to Form 990,	Part IV, line	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicite (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) (h) Share of end-of- year assets allocations?	(h) Disproportionate allocations?	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or managing partner?	(k) Percentage ownership
A/N (F)							Yes No		Yes No	
(2)				j						
(3)										
(4)										
(5)										
(9)										
(7)										
Part IV Identi	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization aline 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	tions Tax	rable as a Cor	as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, ations treated as a corporation or trust during the tax year.)	(Complete if on or trust du	the organiza	ation answe	ered "Yes" to F	orm 990, Par	t I√,
Name, ad	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	micile Direct	(d) Direct controlling entity ()	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) N/A										
(2)										
(3)										
(4)										
(5)										
(9)										
(2)										
								S	Schedule R (Form 990) 2011	n 990) 2011

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

Note	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	ş
~	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-1	ed in Parts II–IV?		1	7/
æ	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a		X
q			. 1b	X	
ပ	: Gift, grant, or capital contribution from related organization(s)		1c		×
ס			1		×
Ф			- 1		×
	Sale of assets to related organization(s)		14		×
D	Purchase of assets from related organization(s)		1g		×
£	Exchange of assets with related organization(s)		+		×
	Lease of facilities, equipment, or other assets to related organization(s)		=		×
-	Lease of facilities, equipment, or other assets from related organization(s)		1j		X
*	: Performance of services or membership or fundraising solicitations for related organization(s)		÷		×
-	Performance of services or membership or fundraising solicitations by related organization(s)		=		×
Ε	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1m		×
_	Sharing of paid employees with related organization(s)		=	×	
			} \\ \(\)		
0	Reimbursement paid to related organization(s) for expenses		10		×
۵	Reimbursement paid by related organization(s) for expenses		1p		×
					4
σ			19		×
-			. 1r		$ \times $
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including cover	including covered relationships and transaction thresholds.	saction thre	shold	ان
	(a) Name of other organization Transaction type (a-r)	(c) Amount involved	(d) Method of determining	(d) determin	<u> </u>
	(Lab) addi		allionill	n Aoi Aeo	
(1) T	(1) The Associated: Jewish Community Federation of Baltimore, Inc.	635,085	FMV		
(2)					
3					
(4)					
(5)					
(9)					1
		Sche	Schedule R (Form 990) 2011	n 990)	2011

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

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

		6	100000000000000000000000000000000000000		odino io imperimenta	040				
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(h) Disproportionate	(i) te Code V—UBI	(I) General or	(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)			allocations?	of Schedule K-1	managing partner?	ownership
			section 512-514)	organizations			 - -	$\overline{}$		
				Yes			Yes No		Yes No	
(1)										
(2)										
(6)										
(4)										
(5)										
(9)										
(1)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

Schedule R (Form 990) 2011

Attachment #1

PEARLSTONE FAMILY FUND, INC. TIN - 52-1249913 Schedule I, Part II December 31, 2011

(a)Name and address of organization	(b)EIN#	(c) IRC section	(d)Amount	(h)Purpose of grant
THE ASSOCIATED: Jewish Community Federation of Balto. 101 W. Mt. Royal Avenue Baltimore, MD 21201	52-0607957	501 (c)(3)	625,085	General support
American Friends of Israel Museum 500 Fifth Avenue New York, NY 10110	23-7182582	501 (c)(3)	1,000	General support
American Friends of Leket Israel 1402 Teaneck Road Teaneck, NJ 07666	20-8202424	501 (c)(3)	500	General support
American Society for Technion-Israel Inst. of Technology 8 Reservoir Circle Baltimore, MD 21208	13-0434195	501 (c)(3)	5,000	General support
Aspen Art Museum 590 N. Mill Street Aspen , CO 81611	84-0746671	501 (c)(3)	2,500	General support
Aspen Country Day School 3 Music School Road Aspen , CO 81611	23-7033239	501 (c)(3)	5,000	General support
Aspen Institute 1000 North Third Street Aspen, CO 81612	84-0818852	501 (c)(3)	2,500	General support
Aspen Jewish Congregation 0077 Meadowood Road Aspen, CO 81611	Synagogue	501 (c)(3)	1,800	General support
Aspen Junior Hockey PO Box 3390 Aspen, CO 81612 Aspen Valley Medical Foundation	51-0143083 84-0643721	501 (c)(3) 501 (c)(3)	1,000 2,500	General support General support
P O Box 1639 Aspen, CO 81612 Baltimore Community Foundation	23-7180620	501 (c)(3)	1,000	General support
2 East Read Street Baltimore, MD 21202 Baltimore Museum of Art	52-6000162	501 (c)(3)	25	General support
10 Art Museum Drive Baltimore, MD 21218 Baltimore Hebrew Congregation	52-0591578	501 (c)(3)	54	General support
7401 Park Heights Avenue Baltimore, MD 21208 Baltimore School for the Arts Foundation, Inc.	52-1174284	501 (c)(3)	2,500	General support
712 Cathedral Street Baltimore, MD 21201 Beth Tfiloh Congregation	52-0592126	501 (c)(3)	978	General support
3300 Old Court Road Baltimore, MD 21208 Beth Tfiloh Dahan Community School 3300 Old Court Road Baltimore, MD 21208	52-1837996	501 (c)(3)	25	General support
Boston University 599 Commonwealth Avenue Boston, MA 02215	04-2103547	501 (c)(3)	3,000	General support
Boys & Girls Clubs of Boston, Inc. 50 Congress Street Boston, MA 02109	04-2103922	501 (c)(3)	25	General support
Center for Inspired Teaching 1436 U Street, NW Washington, DC 20009	95-4328467	501 (c)(3)	1,000	General support
Center for Jewish Culture and Creativity 6399 Wilshire Boulevard Los Angeles, CA 90048	95-4328467	501 (c)(3)	1,000	General support
Central Europe Center For Research and Documentation 3500 Piedmont Road Atlanta, GA 30305	58-1970134	501 (c)(3)	500	General support
Central Scholarship Bureau 1700 Reisterstown Road Baltimore, MD 21297	52-6012589	501 (c)(3)	5,000	General support
The Buddy Program, Inc. 110 East Hallam Street, #125 Aspen, CO 81611	74-2594693	501 (c)(3)	10,000	General support

Attachment #1

PEARLSTONE FAMILY FUND, INC. TIN - 52-1249913 Schedule I, Part II December 31, 2011

(a)Name and address of organization	(b)EIN#	(c) IRC section	(d)Amount	(h)Purpose of grant
Chris Klug Foundation 182 Riberdown Drive Aspen, CO 81611	84-1628444	501 (c)(3)	200	General support
CLAL 440 Park Avenue, South New York, NY 10016	23-7390358	501 (c)(3)	50,200	General support
Counterterrorism and Security Educational Research 4200 Wisconsin Avenue Washington, DC 20016	52-2099490	501 (c)(3)		General support
Edward A. Myerberg Senior Center 3101 Fallstaff RoadBaltimore, MD 21209	52-10477511	501 (c)(3)	5,250	General Support
Grist Magazine, Inc. 710 Second Avenue Seattle, WA 98104	06-1664153	501 (c)(3)	1,500	General Support
Hadassah Baltimore 3723 Old Court Road Baltimore, MD 21208	13-6227614	501 (c)(3)	25	General Support
Hillel: The Foundation for Jewish Campus Life 800 Eighth Street, NW Washington, DC 20001	52-1844823	501 (c)(3)	1,000	General Support
Institute for Christian & Jewish Studies 956 Dulaney Valley Road Baltimore, MD 21204-2633	52-1531016	501 (c)(3)	2,500	General support
Investigative Project on Terrorism Foundation 5505 Connecticut Ave, NW Washington, DC 20015	13-4331855	501 (c)(3)	500	General support
Israel Policy Forum 165 East 56th Street 2nd Floor New York, NY 10022	13-3734324	501 (c)(3)	500	General support
Jewish Agency for Israel 633 Third Avenue New York, NY 10017	13-1760102	501 (c)(3)	100	General support
Jewish Communal Service Association 3084 State Highway 27 Kendall Park, NJ 08824	13-1624105	501 (c)(3)	1,500	General support
Jewish Federation of St. Louis 12 Millstone Campus Drive St. Louis, MO 63146	43-0652643	501 (c)(3)	25	General support
Jewish Federations of North America 25 Broadway, #1700 New York, NY 10004	13-1624240	501 (c)(3)	25,000	General support
Jewish Museum of Maryland 15 Lloyd Street Baltimore, MD 21202	52-6034761	501 (c)(3)	150	General Support
Jewish Recovery Houses 3723 Old Court Road Baltimore, MD 21208	52-6034761	501 (c)(3)	2,500	General Support
JHPIEGO Corporation 1615 Thames Street Baltimore, MD 21213	23-7424444	501 (c)(3)	1,500	General Support
Johns Hopkins Hospital 401 N. Broadway Baltimore, MD 21205	52-0591656	501 (c)(3)	25	General support
Johns Hopkins University 3400 North Charles Street Baltimore, MD 21218	31-1678679	501 (c)(3)	2,500	General support
Living Classrooms Foundation 802 S. Caroline Street Baltimore, MD 21231	52-1369524	501 (c)(3)	1,500	General support
Maryland Institute College of Art 1300 Mt. Royal Avenue Baltimore, MD 21217	52-0591661	501 (c)(3)	3,500	General support
Middle East Media Watch 400 South Lake Drive Lakewood, NJ 08701	06-1611859	501 (c)(3)	1,000	General support
National Aquarium in Baltimore, Inc. 501 East Pratt Street Baltimore, MD 21202	52-1121163	501 (c)(3)	1,500	General support
National Conference of Synagogue Youth 4001 Clarks Lane Baltimore, MD 21215	52-1071003	501 (c)(3)	1,250	General support
National Jewish Medical and Research Center 1400 Jackson Street Denver, CO 80206	74-2044647	501 (c)(3)	1,500	General support

PEARLSTONE FAMILY FUND, INC. TIN - 52-1249913 Schedule I, Part II December 31, 2011

(a)Name and address of organization	(b)EIN#	(c) IRC section	(d)Amount	(h)Purpose of grant
		504 (-)(0)		
Neshama Center	14-1964306	501 (c)(3)	25	General support
P.O. Box 8064 Aspen, CO 81612	22 0044204	E04 (a)(2)	1,400	General support
Pancreatic Cancer Action Network	33-0841281	501 (c)(3)	1,400	General support
2141 Rosecrans Avenue El Segundo, CA 90245 Peobody Institute	52-0595110	501 (c)(3)	5,000	General support
1 E. Mt. Vernon Place Baltimore, MD 21202	32-0393110	301 (0)(3)	3,000	General Support
Rocky Mountain Institute	74-2244146	501 (c)(3)	500	General support
1739 Snowmass Creek Road Snowmass, CO 81654	14 2244140	001 (0)(0)	000	Conoral support
Shoresh, Inc.	52-1664097	501 (c)(3)	7,200	General support
2704 Bartol Avenue Baltimore, MD 21209	02 100 1001	00. (0)(0)	1,200	Control Capport
St. Frances Academy	Church	501 (c)(3)	1,500	General support
501 East Chase Street Baltimore, MD 21202	2113131	(-/(-/	.,	
Steadman Hawkins Sports Medicine Foundation	88-0245022	501 (c)(3)	500	General Support
181 West Meadow Drive Suite 1000 Vail, CO 81657		(// /		, ,
Susan G. Komen Breast Cancer Foundation	52-2053491	501 (c)(3)	1,000	General support
200 East Joppa Road Towson, MD 21286				• •
Talmudical Academy of Baltimore	52-0591676	501 (c)(3)	25	General support
4445 Old Court Road Baltimore, MD 21208				
The American Jewish Joint Distribution Committee	13-1656634	501 (c)(3)	2,000	General support
711 3rd Avenue New York, NY 10017				
The Israel Project	37-1472882	501 (c)(3)	500	General support
2020 K Street, NW, #7600 Washington, DC 20006				
The Park School	52-0591625	501 (c)(3)	80,700	General support
P.O. Box 8200 Brooklandville, MD 21022				
Tikva Corp.	22-3779212	501 (c)(3)	1,000	General support
40 West 23rd Street New York, NY 10010				
United Jewish Appeal of New York	51-0172429	501 (c)(3)	25	General support
130 E. 59th Street New York, NY 10022	07.4440005	504 ()(5)	· · · · · ·	
United Jewish Appeal - Aspen Valley Campaign	37-1418235	501 (c)(3)	25,025	General support
P.O. Box 1167 Aspen, CO 81612	E0 0E04E40	E04 (-V2)	4 000	C
United Way of Central Maryland	52-0591543	501 (c)(3)	1,000	General support
100 S. Charles Street Baltimore, MD 21203 University of Maryland Foundation	52-1125663	E01 (a)(2)	2,000	General support
3501 University Blvd East Adelphi, MD 20783	52-1125005	501 (c)(3)	2,000	General support
World Council of Jewish Communal Services	13-3203606	501 (c)(3)	1,000	General support
711 Third Avenue New York, NY 10017	10-0200000	301 (0)(3)	1,000	Ceneral support
WYPR Radio	31-1770828	501 (c)(3)	2,000	General support
2216 N. Charles Street Baltimore, MD 21218	31 1170020	001 (0)(0)	2,000	Control Support
22 10 11. Change Groot Balantolo, IND 212 10				

909,617