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Form. 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

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Name change Initial return 1633 Connecticut Avenue NW 3rd Floor (202) 408-1423 Terminated Term	es X N es N ulle D(
Initial return 1633 Connecticut Avenue NW 3rd Floor (202) 408-1423	es X N es N ulle D(
Terminated Amended return Application pending F Name and address of principal officer Jacob Feinspan C/o Jews United for Justice, Inc. 1633 Connectic I Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527 I Website: ▶ www.Jufj.org K Form of organization X Corporation Trust Association Other ▶ L Year of formation 2001 M State of legal domic our shared Jewish values by pursuing justice and equity, in our local community Part I Summary 1 Briefly describe the organization's mission or most significant activities: To lead Washington area Jews to act on our shared Jewish values by pursuing justice and equity, in our local community 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 Total unrelated business revenue from Part VIII, column (C), line 12 7a	es X N
Terminated Amended return Amended return Amended return Application pending Application pending F Name and address of principal officer Jacob Feinspan C/o Jews United for Justice, Inc. 1633 Connectic If "No." attach a list (see instructions) Tax-exempt status X 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527 (if "No." attach a list (see instructions) Website: www.Jufj.org H(c) Group exemption number M(c) Group exempti	es X N es N dele Dele
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Jacob Feinspan c/o Jews United for Justice, Inc. 1633 Connectic I Tax-exempt status	Nulle D
I Tax-exempt status	ale D
Website:	
Part I Summary 1 Briefly describe the organization's mission or most significant activities: To lead Washington area Jews to act on our shared Jewish values by pursuing justice and equity in our local community 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)	
Briefly describe the organization's mission or most significant activities: To lead Washington area Jews to act on our shared Jewish values by pursuing justice and equity in our local community 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)	
Principles 1 Briefly describe the organization's mission or most significant activities: To lead Washington area Jews to act on our shared Jewish values by pursuing justice and equity in our local community 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)	
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our shared Jewish values by pursuing justice and equity in our local community 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)	
2 Check this box	
7a Total unrelated business revenue from Part VIII, column (C), line 12	
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7a Total unrelated business revenue from Part VIII, column (C), line 12	
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7a Total unrelated business revenue from Part VIII, column (C), line 12	
7a Total unrelated business revenue from Part VIII, column (C), line 12	
RECEIVED Prior Year Current Y	ear
8 Contributions and grants (Part VIII, line 1h) 1 278.6631	509,5
9 Program service revenue (Part VIII, line 2g)	
10 Investment income (Part VIII, column (A), lines 4, and 7d) 5.2012 0 67	
111 Other revenue (Part VIII. column (A), lines 5, 6d,18c, 9c, 10c, and 11e), 100 II.	
12 Total revenue—add lines 8 through 11 (must equal Part (4)) solumn (A), line 12 278,730	509,55
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) U. 1. 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 5–10) 177 520	273,0
16a Professional fundraising fees (Part IX, column (A), line 11e)	
b Total fundraising expenses (Part IX, column (D), line 25) ► 6,337	
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	147,8
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	420,8
19 Revenue less expenses. Subtract line 18 from line 12	88,68
5 🖔 Beginning of Current Year End of Yo	
20 Total assets (Part X, line 16)	272,77
21 Total liabilities (Part X, line 26)	81,40
21 Total liabilities (Part X, line 26)	191,37
Part II Signature Block	
Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge	
and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	
Sign Date	
Horo Signature of officer	
Jacob Fellispan, Executive Director	
Type or print name and title	
Print/Type preparer's name Preparer's signature Date Check If	
Paid 8/31/2012 self-employed P01214	758
Preparer DAG Hill & Accocidence	. 50
Use Univ	
Firm's address ► 7603 Georgia Avenue NW Ste 300, Washington, DC 20012 Phone no 202 491 6118	
May the IRS discuss this return with the preparer shown above? (see instructions)	<u> </u>

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

Total program service expenses ► 363,506

Other program services. (Describe in Schedule O.)

Page 3

Far	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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,	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
	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? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in 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, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44-	x	
b	Schedule D, Part VI	11a	^	\Box
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
	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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		$\frac{\hat{x}}{x}$
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
42-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		Х
124	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
42	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	12b 13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		^
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1		
	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	47		
18	on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17		_×
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	_
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		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		ĺ

Par	t IV 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			
24a	employees? If "Yes," complete Schedule J	23 24a		×
	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	24b		
	to defease any tax-exempt bonds?	24c 24d		
	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
28	entity or family member of any of these persons? <i>If</i> "Yes," complete Schedule L, Part III	27		X
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		X
	Schedule L, Part IV	28b		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		х
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		X
31	conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		Х
	Part I	31		Х
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
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		
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		Х
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			
38	VI	37		X
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2011)

Part V JEWS UNITED FOR JUSTICE INC
Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	_		İ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	X.	 -
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	,		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			ŀ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	. 4a		X
b	If "Yes," enter the name of the foreign country: ▶	.		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		<u>.</u>	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?.	5b	<u> </u>	_X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	x	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	F ,		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	/
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	. 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_ Jii		,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .	7g	X	├—
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X	—
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	ی ا		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ٔ ۾ ا	-	-
^	organization, have excess business holdings at any time during the year?	8	, , ,	
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	. 9a		÷ .
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
р 0	Section 501(c)(7) organizations. Enter:	135	1	<u> </u>
a	Initiation fees and capital contributions included on Part VIII, line 12	ŀ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		-	
1	Section 501(c)(12) organizations. Enter:		,	
a	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources	7.	,	; ;
	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]		Ì	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13a	<u> </u>	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.		1	,
b	Enter the amount of reserves the organization is required to maintain by the states in which		.]-	ľ
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		ļ <u>s</u>	1/3
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u></u>

JEWS UNITED FOR JUSTICE INC Form 990 (2011). Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 12 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. 11 b 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 X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . 5 5 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a b Each committee with authority to act on behalf of the governing body? 8b Х 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? . . . 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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 Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13. 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c Х 13 13 14 Х Did the organization have a written document retention and destruction policy? . . . 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? The organization's CEO, Executive Director, or top management official 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest

State the name, physical address, and telephone number of the person who possesses the books and records of the

2027 Massachussetts Ave NW, 3rd Floor, Washington Dc, DC 20036

policy, and financial statements available to the public.

organization: > Jacob Feinspan

orm 990 (2011) •	JEWS UNITED FOR JUSTICE INC	52-2346578	Page 7
Part-VII	Compensation of Officers, Directors, Trustees, Key Employee	s. 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 (descnbe hours for related organizations in Schedule O)	box,	unles er an	Pos neck ss pe	rson	than the structure of t	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	Repo compe from r	E) rtable nsation elated zations 99-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Roberta Ritvo Secretary	4.00	х		х				0		0	0
(2) Rabbi Jessica Oleon Director	2.00	х						0		0	0
(3) Rabbi Stephanie Bernstein Director	2.00	х						0		0	0
(4) Abıgaıl Levine Dırector	2.00	х						0		0	0
(5) Rabbi Bob saks Director	2.00	х						0		0	0
(6) Micheal Rubin Treasurer	4.00	х		Х				0		0	0
(7) Adina Rosenbaum President	4.00	Х		Х				0		0	0
(8) Shelley Moscowitz Director	2 00	х						0		0	0
(9) David Mackoff Director	2.00	Х						0		0	0
(10) Brianne Nadeau Director	2.00	Х						0		0	0
(11) Elissa Froman Director	2.00	х						0		0	0
(12) Jacob Feinspan Executive Director	40.00				х	Х		50,446		0	0
(13)											
(14)											-

Pa	art VII Section A. Officers, Directors, Tr	ustees, Key E	mplo	yee	s, a	nd	<u>Hig</u> h	est	Compensated	Employees (oloyees (continued)				
	(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(do r box, office	not ch unles er and	Pos neck ss pe	C) sition more erson lirect	n of such Highest compensated the such employee	one n an tee)	(D) Reportable	(E) Reportable compensation from related organizations (W-2/1099-MISC			nated int of ner nsation the zation		
(1,5)											+			_	
(16)											+				
(17)							_					_	-		
(18)														_	
(19)															
(20)											+				
<u>(21)</u>											\dagger				
(22)											+			_	
(23)								-			\top				
(24)														_	
(25)											\top		_		
С	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c). Total number of individuals (including but not I reportable compensation from the organization	Section A 	listec	 I ab	ove		· ·	▶	50,446 0 50,446 red more than \$		0 0 0			0 0 0	
3	Did the organization list any former officer, dir employee on line 1a? If "Yes," complete Schee						, or h	igh	est compensate	d 		Ye	s No		
4	For any individual listed on line 1a, is the sum the organization and related organizations gre individual	•	•						•			4	X		
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "									ndıvıdual		5	ĺ.	_	
Sect	ion B. Independent Contractors													_	
1	Complete this table for your five highest components of compensation from the organization. Report of year.											tax			
	(A) Name and business addr	ess							(B) Description of ser	vices	Corr	(C) npensati	on		
														0	
														0	
														<u>0</u> 0	
								-						0	
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	-	nited	to th	nose	e lis	ted a	bov	ve) who received	t l				_	

Form 9	90 (201	1). JEWS UNITED FOR JUSTICE INC					52-2346	578 Page 9
Par	ŁVIII	Statement of Revenue						
			, -		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	0				ļ
S, (С	Fundraising events	1c	53,154				
Giff	d	Related organizations	1d	229,561				
ini iri	е	Government grants (contributions)	1e	0			ļ	
tior r. S	f	All other contributions, gifts, grants, and						
the the		sımılar amounts not included above	1f	226,836				
d di	g	Noncash contributions included in lines 1a-1f:	\$	0				
a C	h	Total. Add lines 1a-1f		🕨	509,551			
en				Business Code				m
/en	2a				0			
æ	b				0			
ice	С				. 0			
Şe.	d				0			
Program Service Revenue	е				0			
gra	f	All other program service revenue			0			
F.	q	Total. Add lines 2a–2f		▶	0			
	3	Investment income (including dividends, inte	eres	t, and ▶	0			
	4	Income from investment of tax-exempt bond	l pro	ceeds	0			
	5	Royalties		<u> ▶</u>	0			
		(ı) Real		(II) Personal	,			
	6a	Gross rents			- 1201-12	7.00° ×	, š.	
	b	Less: rental expenses			\$711.	· · · · · · · · · · · · · · · · · · ·	1	
	С	Rental income or (loss)	0	0		·,		
	d	Net rental income or (loss)		.	0			
	7a	Gross amount from sales of (i) Securities	s	(ii) Other	C. James	***	* * *]
		assets other than inventory .	0	0		* . * *	*	
	b	Less. cost or other basis			# 12 m	•	ļ	
		and sales expenses	0				[
	С	Gain or (loss)	0	0		3		
	d	Net gain or (loss)		<u> </u>	0			
Other Revenue	8a	Gross income from fundraising events (not including \$ 46,817 of contributions reported on line 1c).			,	,		
her R		See Part IV, line 18		6,337		/ %		
ŏ		Less direct expenses		6,337				
	i	Net income or (loss) from fundraising events	S	<u> </u>	0		-	ļ
	9a	Gross income from gaming activities.		_		i i	1	
		See Part IV, line 19		0		48.0.		
		Less direct expenses		0				
		Net income or (loss) from gaming activities		<u> </u>	0		 	
	10a	Gross sales of inventory, less		_				1
		returns and allowances			•		,	
		Less cost of goods sold						
	С	Net income or (loss) from sales of inventory	<u>.</u>	▶	0		ļ	
		Miscellaneous Revenue		Business Code			 	
	11a				0			
	b				0			
	С				0		ļ. <u>. </u>	
	d	All other revenue		L	0			<u> </u>
	e	Total. Add lines 11a-11d			0	<u> </u>		
	12	Total revenue. See instructions	<u> </u>	<u>.</u> . >	509,551	C)

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 response to any	question in this Pa	rt 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	0			
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,			' ¹ ,	
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16.	0			., 3
4	Benefits paid to or for members			52 'R	x* *
5	Compensation of current officers, directors,	50.446	20 172	22 274	
_	trustees, and key employees	50,446	28,172	22,274	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ام			
7	persons described in section 4958(c)(3)(B) Other salaries and wages	177,075	177,075		
7	Other salaries and wages Pension plan accruals and contributions (include	177,075	117,013		
8	section 401(k) and 403(b) employer contributions)	اه			
9	Other employee benefits	23,973	22,099	1,874	
10	Payroll taxes	21,520	19,198	2,322	·-····································
11	Fees for services (non-employees):	21,020	10,100	2,022	
' 'a	Management	17,469	17,469		
b	Legal	0	,		
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0	\$ 12 M	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
f	Investment management fees	0		<u> </u>	
g	Other	-1			
12	Advertising and promotion	0			
13	Office expenses	34,875	18,767	16,108	
14	Information technology	7,587	6,429	1,158	
15	Royalties	0			
16	Occupancy	31,150	27,550	3,600	
17	Travel	3,116	734	2,382	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	25,695	25,695	- 	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	1,033	783	250	· · · · · · · · · · · · · · · · · · ·
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.)	7,454	7,454	<u> </u>	*** *
а	Tıkkun Leil Shabbat	6,337			6,337
b	Heschel Awards	6,390	6,390		
C	Jeremiah Fellowship	2,412	2,412		
d	Labor Seder All other expenses Overhead	4,337	3,279		
e		420,868			
25	Total functional expenses. Add lines 1 through 24e . Joint costs. Complete this line only if the	420,000	000,000	31,320	0,007
26	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
	TOTIOWING OUT 30-2 (ACC 300-120)	<u> </u>	-		5 000 (55)

¥	art X	Balance Sheet		1	
			(A) Beginning of year		(B) End of year
	1	Cashnon-interest-bearing	94,405	1	156,346
	2	Savings and temporary cash investments	5,723	2	105,934
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	8,543
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ets		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	0	7	0
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	دي مد		
		other basis. Complete Part VI of Schedule D 10a 4,85			
	b	Less accumulated depreciation 10b 4,85			0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets			1.050
	15	Other assets See Part IV, line 11			1,950 272,773
	16	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses	103,400	17	6,403
	17 18	Grants payable		18	0,400
	19	Deferred revenue		19	75,000
	20	Tax-exempt bond liabilities		20	70,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key	· & .	,	
		employees, highest compensated employees, and disqualified			
	-	persons Complete Part II of Schedule L		22	and the matter of control of the con
Ë	23	Secured mortgages and notes payable to unrelated third parties .	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	0	26	81,403
		Organizations that follow SFAS 117, check here ►X and			
ő		complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	103,400	27	191,370
Bal	28	Temporarily restricted net assets		28	
Þ	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117, check here ▶			
٥		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	103,400	33	191,370
	34	Total liabilities and net assets/fund balances	103,400	34	272,773

Form 9	990 (2011) JEWS UNITED FOR JUSTICE INC	52-	2346578	Pag	ge 12
Par	Reconciliation of Net Assets				
	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			<u>,551</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		420	,868
3	Revenue less expenses. Subtract line 2 from line 1	3			3,68 <u>3</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		103	<u>3,400</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			<u>-713</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	6		101	,370
	column (B))			191	,370
Part	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: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				â » >
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Χ	
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ_	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		2c		Χ
	If the organization changed either its oversight process or selection process during the tax year, explain in	า		, ,	. 3
	Schedule O.			·**	,
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis		· ·	*	٠
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			-	
	the Single Audit Act and OMB Circular A-133?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

►See separate instructions.

Employer identification number Name of the organization 52-2346578 JEWS UNITED FOR JUSTICE INC 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 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 5 in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 9 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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. c Type III–Functionally integrated **b** Type II 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 I, Type II, or Type III supporting f organization, check this box. Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes Nο and (iii) below, the governing body of the supported organization? 11g(i)

• •		y of a person describe					•	٠	11g(iii)
h Provide the f	ollowing inform	ation about the suppo	rted orgar	nzation(s)					,
(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	you notify nization in of your port?	organizat	is the tion in col zed in the S?	(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)	_								
(B)									
(C)									
(D)			<u> </u>						
(E)									
Total					· :			<	

11g(II)

18

	3E 4 (1 01K1 990 01 990-LZ) 2011 3E 440 01411 EB	T OIX JOSTICE	- 1110			32-20 4 031	U Faye z
Par							
	(Complete only if you checked the	box on line 5	, 7, or 8 of Pa	art I or if the o	rganization fa	iled to qualify	under
	Part III. If the organization fails to	qualify under	the tests liste	d below, pleas	se complete F	Part III.)	
Sect	ion A. Public Support						
Cale	ndar 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.") .				i		0
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge				;		0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by each	٠ ٨٠,					
	person (other than a governmental unit	المُدرِد * *		, ;			
	or publicly supported organization)		· i wads	~ `			
	included on line 1 that exceeds 2%				Ť		
	of the amount shown on line 11,	*					
	column (f)		*				
6	Public support. Subtract line 5 from line 4.			<u>,</u>	,,		0
	ion B. Total Support			,	· · · · · · · · · · · · · · · · · · ·		
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						0
9	Net income from unrelated business	1			İ		
	activities, whether or not the business is				i		
	regularly carried on						0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10.						0
12	Gross receipts from related activities, etc (s					12	
13	First five years. If the Form 990 is for the o)(3)
	organization, check this box and stop here						▶⊔
	ion C. Computation of Public Support						
14	Public support percentage for 2011 (line 6, o					14	0.00%
15	Public support percentage from 2010 Sched					15	0 00%
16a	33 1/3% support test—2011. If the organize				ne 14 is 33 1/3	3% or more, che	eck this box
_	and stop here. The organization qualifies as					0.4/00/	_ ,
b	33 1/3% support test—2010. If the organization					33 1/3% or mor	e, check this
	box and stop here. The organization qualifie	-	· · ·				· •
17a	10%-facts-and-circumstances test2011						
	is 10% or more, and if the organization mee						
	Part IV how the organization meets the "fact			•	•		
	organization						. ▶∐_
b	10%-facts-and-circumstances test—2010						
	15 is 10% or more, and if the organization m	neets the "facts	-and-circumsta	ances" test, che	eck this box an	d stop here. E	xplain in
	Part IV how the organization meets the "fact						
	supported organization						. ▶[

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

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.)

Sec	tion A. Public Support						
	endar 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.")	103,771	216,804	202,727	278,663	509,551	1,311,516
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			-			0
3	Gross receipts from activities that are not an unrelated trade or business under section 513					_	0
4	Tax revenues levied for the organization's					[
	benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	103,771	216,804	202,727	278,663	509,551	<u>1,311,516</u>
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year		0	0			0
С 8	Add lines 7a and 7b			-	0	- 0	0
	Public support (Subtract line 7c from line 6)				ć, 	1 1863	1,311,516
	tion B. Total Support			т			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	103,771	216,804	202,727	278,663	509,551	1,311,516
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources	823	<u>5</u> 15	157	67		1,562
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses				İ		
_	acquired after June 30, 1975	823	515	157	67	0	0
С 11	Add lines 10a and 10b Net income from unrelated business	623	215	157	- 67		1,562
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income Do not include gain or			The state of the s			
	loss from the sale of capital assets			}			
	(Explain in Part IV)	213	172	0	0		385
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	104,807	217,491	202,884	278,730	509,551	1,313,463
14	First five years. If the Form 990 is for the organization, check this box and stop here	ation's first, secor	nd, third, fourth,	or fifth tax year a	s a section 501(d	c)(3)	▶□
Sec	tion C. Computation of Public Support	Percentage		-			
15	Public support percentage for 2011 (line 8, column		3, column (f))	<u>-</u>		15	99.85%
16	Public support percentage from 2010 Schedule A,	• •				16	99 67%
Sec	tion D. Computation of Investment Inco	me Percenta	ge				
17	Investment income percentage for 2011 (line 10c,			ımıs (f))		17	0 12%
18	Investment income percentage from 2010 Schedul				. [18	0 25%
19a	33 1/3% support tests—2011. If the organization						
	not more than 33 1/3%, check this box and stop he						▶ [X]
b	33 1/3% support tests—2010. If the organization						_
	line 18 is not more than 33 1/3%, check this box ar						▶∐
20	Private foundation. If the organization did not che	ck a box on line	14, 19a, or 19b,	check this box ar	nd see instruction	ns	▶ []

Schedule A (Form	990 or 990-EZ) 2011	JEWS UNITED FOR JUSTICE INC	52-2346578	Page 4
Part IV	Supplemental	Information. Complete this part to provide the explanations require	d by Part II, line	10;
	Part II line 17a	or 17b; and Part III, line 12. Also complete this part for any additional	al information. (S	ee
		or 175, and 1 art in, into 12.7 hos complete and part for any addition	(C	
	instructions).			
				·
				
		•••••		
		•••••		
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	·		• • • • • • • • • • • • • • • • • • • •	· • • • • • • • • • • • • • • • • • • •
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			•••••	
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- 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-EZ, Part V, line 35c (Proxy Tax), then

		recoverations: Complete Bart III	142, 01 1 01111 330-	LL, ruit v, illic ooc (r roxy i	ax,, men
Name	ection 501(c)(4), (5), or (6) o e of organization	rganizations: Complete Part III		Employe	r identification number
	S UNITED FOR JUSTICE	E INC			52-2346578
	t I-A Complete if t	he organization is exempt und	er section 501(c) or is a section 527 o	rganization.
1	Provide a description of	the organization's direct and indirect	political campaig	n activities in Part IV.	
2				▶\$	
3	Volunteer hours				
Par	rt I-B Complete if t	he organization is exempt und	er section 501(c)(3).	
1	Enter the amount of any	excise tax incurred by the organization	on under section	4955	
2	Enter the amount of any	excise tax incurred by organization i	managers under s	section 4955 🕨 \$	
3	If the organization incurre	ed a section 4955 tax, did it file Form	n 4720 for this yea	ar?	Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part				
Pai	t I-C Complete if t	he organization is exempt und	er section 501(c), except section 501(c)(3)
1	Enter the amount directly	y expended by the filing organization	for section 527 e	exempt function	
	***************************************			- · ·	
2		filing organization's funds contributed unction activities			
3		penditures. Add lines 1 and 2. Enter			
					0
4		n file Form 1120-POL for this year?			Yes No
5	Enter the names, addres	ses and employer identification num	ber (EIN) of all se	ection 527 political organiza	ations to which the filing
	organization made paym	ents. For each organization listed, e ontributions received that were prom	nter the amount p	elivered to a senarate polition	tical organization, such
	as a separate segregate	d fund or a political action committee	e (PAC). If addition	nal space is needed, provi	de information in Part IV.
		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) EIIV	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
(1)					
				0	0
(2)				0	0
(3)				0	0
(4)					
				0	0
(5)				0	0
(6)					_

			•
a	α	e	Z

SCH	eaule C (Form 990 or 990-EZ) 2011						raye Z
Р	art II-A Complete if the organizati	on is exem	pt under se	ction 50	01(c)(3) and file	d Form 5768 (elec	tion
_	under section 501(h)). Check ▶ if the filing organization because of the filing organization organization or the filing organization o	alanga ta si	n offiliated a	roup (or	d list in Part IV s	ach affiliated grou	n mombor's
Α	Check ▶ if the filing organization because if the filing organization is the filing organization because if the filing organization is the filing organization or the filing organi						p member s
В	Check if the filing organization of						
					or providente ap		
	Limits on Lol (The term "expenditures"			ncurred.)	(a) Filing organization's totals	(b) Affiliated group totals
	Total lobbying expenditures to influence					-	0
b	Total lobbying expenditures to influence						0
c	Total lobbying expenditures (add lines 1a					0	0
d	Other exempt purpose expenditures						0
е	Total exempt purpose expenditures (add					0	0
f	Lobbying nontaxable amount. Enter the						
	columns.					0	0
ſ	If the amount on line 1e, column (a) or (b) is	: The lobb	ying nontaxal	ble amou	nt is:		
	Not over \$500,000		ne amount on li			Ť	-
	Over \$500,000 but not over \$1,000,000				over \$500,000		
ŀ	Over \$1,000,000 but not over \$1,500,000				over \$1,000,000.		
ŀ	Over \$1,500,000 but not over \$17,000,000	\$1,000,0		e excess c	over \$1,500,000	A	
	Over \$17,000,000 Grassroots nontaxable amount (enter 25				<u>l</u>	0	0
g	Subtract line 1g from line 1a. If zero or le	se enter -N-		•		0	0
h	Subtract line 1f from line 1c If zero or les					0	0
i	If there is an amount other than zero on e			•		4720 reporting	
,	section 4911 tax for this year?					i i	Yes No
						`	
	4- Some organizations that	Year Averag				anlete all of the five	
					a through 2f on p		
	Lobby	ing Expendit	ures During	4-Year A	veraging Period	T	
	Calendar year (or fiscal year	(a) 2008	(b) 2	009	(c) 2010	(d) 2011	(e) Total
	beginning in)		·				
		·	 	· ·			
2a	Lobbying nontaxable amount					0	0
b	Lobbying ceiling amount	·	200	f	ţ		
	(150% of line 2a, column(e))	*					0
	Total lobbying expenditures					0	0
d	Grassroots nontaxable amount					0	0
е	Grassroots ceiling amount (150% of line 2d, column (e))	\$				- 4. ·	0
f	Grassroots lobbying expenditures	<u>*</u>				0	0
	1		ı		l	ı U	U

Schedule C (Form 990 or 990-EZ) 2011

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 5768	
For	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)	
	e lobbying activity.	Yes	No	Amo	unt
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:		-		1
а	Volunteers?	X			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х			
С	Media advertisements?		Х		
d	Mailings to members, legislators, or the public?	Х			250
е	Publications, or published or broadcast statements?		Х		
f	Grants to other organizations for lobbying purposes?		Х		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х			1,500
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Х			4,000
i	Other activities?		_X		
j	Total Add lines 1c through 1i.			·	5,750
2a			<u> </u>		
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.			_k λ 3	
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	-1/51		notion .	
rai	501(c)(6).	<i>-</i>)(5),	01 56	ection	
				Ye	s 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 carry over lobbying and political expenditures from the prior year?		<u> </u>	3	
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."				3, is
1	Dues, assessments and similar amounts from members	.	_1_		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ı			
а	Current year	•	2a		
b	Carryover from last year	•	2b		
	Total	ŀ	2c		0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ŀ	3		
4	excess does the organization agree to carryover to the reasonable estimate of nondeductible				
	lobbying and political expenditure next year?	ľ	4		
5	Taxable amount of lobbying and political expenditures (see instructions)	ŀ	5		
Part		,			
	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; I	Part II	-A· an	d Part II-B	line 1
	complete this part for any additional information.		,		,
,	••••••••••••••••••••••••••••••••••••••				
- <i></i>					
-		·			

JEWS UNITED FOR JUSTICE INC	52-2346578
Schedule C (Form 990 or 990-EZ) 2011	Page 4
Part IV Supplemental Information (continued)	
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	•••••
	••••••
	•••••

52-2346578

SCHEDULE D (Form 990)

Supplemental Financial Statements

Employer identification number

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

JEW	S UNITED FOR JUSTICE INC	52-2346578
Par	Organizations Maintaining Donor Advised Funds or Other Similar Fun	nds or Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year) .	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held i	n donor advised
	funds are the organization's property, subject to the organization's exclusive legal control	1? Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant	funds can be
	used only for charitable purposes and not for the benefit of the donor or donor advisor, o	r for any other
	purpose conferring impermissible private benefit?	Yes No
Par	Conservation Easements. Complete if the organization answered "Yes" to	Form 990, Part IV, line 7.
4	Purpose(s) of conservation easements held by the organization (check all that apply).	
'		f an historically important land area
		•
	Protection of natural habitat Preservation o	f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	ļ
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or term	ninated by the organization
	during the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection	· []
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	easements during the year
~	A second of second in seco	manta di mantha i inn
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease	ments during the year
_	December 2011 and a second translated on line 2(d) shows satisfy the requirements of	of a action
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	· · · · · Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue	
J	balance sheet, and include, if applicable, the text of the footnote to the organization's final	
	the organization's accounting for conservation easements.	anciai statements that describes
Par		Similar Assets
-	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
		overties at a terminal training at the second secon
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its resolvent and the state in the st	
	works of art, historical treasures, or other similar assets held for public exhibition, educat	
t.	of public service, provide, in Part XIV, the text of the footnote to its financial statements to	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reversable of set, biotesical transpures, or other similar assets hold for public exhibition, educate	
	works of art, historical treasures, or other similar assets held for public exhibition, educated by the parties provide the following amounts relating to those items:	ion, or research in furtherance
	of public service, provide the following amounts relating to these items:	▶ •
	(i) Revenues included in Form 990, Part VIII, line 1	• • • • • • • • • • • • • • • • • • •
_	(ii) Assets included in Form 990, Part X	ate for financial gain, provide the
2		
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these if Revenues included in Form 990, Part VIII, line 1	
a	Assets included in Form 990. Part X	
n	Maaria munucu III I VIIII 220. I GILA	

JEWS UNITED FOR JUSTICE INC 52-2346578 Schedule D (Form 990) 2011 Page 2 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а Scholarly research Other b Preservation for future generations C Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990. Part Part IV IV, line 9, or reported an amount on Form 990, Part X, line 21. is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not 1a Yes | No If "Yes," explain the arrangement in Part XIV and complete the following table: b Amount 1c C 1d d 1e 1f f Ending balance. Yes X No Did the organization include an amount on Form 990, Part X, line 21? . If "Yes," explain the arrangement in Part XIV. b Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back Beginning of year balance . . . 1a b Contributions Net investment earnings, gains, and losses. d Grants or scholarships Other expenditures for facilities and programs . . f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment а Permanent endowment b Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the 3a Yes No organization by: unrelated organizations 3a(i) 3a(ii) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? b Describe in Part XIV the intended uses of the organization's endowment funds.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	0	× 4, * -	
b	Buildings	0	0	0	(
С	Leasehold improvements	0	0	0	(
d	Equipment	0	4,850	4,850	
е	Other	0	0	0	(
Tota	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part X	, column (B), line 10(c	:).)	(

Part VII Investments	s—Other Securitie	s. See Form 990, Par	tΧ,	line 12.					
(a) Description of security (including name of security)		(b) Book value				Method of val and-of-year m		16	
(1) Financial derivatives			0						
(2) Closely-held equity interes			0						
(3) Other			0						
(A)			0						
(B)			0				_		
(C)			0	_					
(D)			_ 0						
(Ē)			0						
(F)			0						
(G)			0			-			
(Ḥ)			0						
(l)			0	e z sis sac		,		-	
Total (Column (b) must equal Form 990, Pa			0						
Part VIII Investment	s—Program Relate	ed. See Form 990, Pa	rt X,	line 13.					
(a) Description of inves	stment type	(b) Book value				Method of val end-of-year m		ıe	
(1)		· · · · · · · · · · · · · · · · · · ·	0						
(2)			0						
(3)			0						
(4)			0						
(5)			- 0						
(6)			0						
			0						
	·	***	- 6						
(9)			히						
(10) Total (Column (b) must equal Form 990, P.	art X. col (B) line 13)		- öl				*		
	ts . See Form 990, F	Part X line 15		·- 					
Fait IA Other Asse) Description				1	(1) Book valu	e
(1)		, 2000						,	0
(2)		· · · · · · · · · · · · · · · · · · ·		-					0
(3)									0
(4)							-		0
(5)		· · · · · · · · · · · · · · · · · · ·							0
(6)									0
(7)	<u> </u>								0
(8)									0
(9)									0
(10)									0
Total. (Column (b) must equa				· _ ·		. ▶			0
Part X Other Liabi	lities. See Form 99	0, Part X, line 25.							
1. (a) Description	of liability	(b) Book value		4 M		e e Spira		å ·	ļ
(1) Federal income taxes		·	_0		3				'
(2)			0	~	*				
(3)			이	<i>7</i> .	\$.		7		
(4)			_0						
(5)			0						
(6)		<u> </u>	_의						
			<u> </u>						
(8)			_				,	*	
(9)			_0						
(10)			0	. *					
(11)			_ 0	/ % ·	^				
Total (Column (b) must equal Form 990, F	Part X, col (B) line 25)		<u> </u>						

Page 4

Par	Reconciliation of Change in Net Assets from Form 990 to Audited	Financial St	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	509,551
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	420,868
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	88,683
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net) Add lines 4 through 8		9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	88,683
Par	t XII Reconciliation of Revenue per Audited Financial Statements With	Revenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements		1	509,551
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		; "	
С	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	509,551
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		*(3, 7,	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u> </u>	5	509,551
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With	n Expenses :	per Return	i
1	Total expenses and losses per audited financial statements		1	420,868
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			
С	Other losses			
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	420,868
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		٠	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	 		
b	Other (Describe in Part XIV.)		<u> </u>	
С	Add lines 4a and 4b		4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18).	<u> </u>	5	420,868
Par	t XIV Supplemental Information			
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, line 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, line part to provide any additional information.			
				•

Schedule D (Form	990) 2011	
Part XIV	Supplemental Information	(continued)

52-2346578

Schedule D (Form 990) 2011

JEWS UNITED FOR JUSTICE INC

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or If the

organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

JEWS UNITED FOR JUSTICE INC 52-2346578							
Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.							
4	Indicate whether the organization ra	required to co	nipiete tri	is part.	ving activities. Char	ck all that apply	
1 a	Mail solicitations	aiseu iulius iili	e S	olicitation o	of non-government	orants	
	Internet and email solicitations				of government gran	-	
b	=					15	
C	Phone solicitations		g L S	peciai iuno	raising events		
d	In-person solicitations						
2a	Did the organization have a written						
	key employees listed in Form 990,						Yes No
b	If "Yes," list the ten highest paid inc to be compensated at least \$5,000			aisers) pur	suant to agreemen	is under which the	tundraiser is
	to be compensated at least \$5,000	by the organiza	auon.				
				•		(v) Amount paid to	
	(i) Name and address of individual	(ii) Activity	, , ,	draiser have r control of	(iv) Gross receipts	(or retained by)	(vI) Amount paid to (or retained by)
	or entity (fundraiser)	(II) Activity		utions?	from activity	fundraiser listed in	organization
			Yes	No	_	col (i)	
1			163	140			
•					0	o	0
2					0	0	0
3							
4					0	0	0
					0	0	0
					0	0	0
6					0	0	0
7					0	0	0
8					0	0	0
9		-			0	0	
10						_	0
			L	l	0	0	0
Total				▶	اه	0	0
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.							
•••••••••••••••••••••••••••••••••••••••							
							
							• • • • • • • • • • • • • • • • • • • •

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

		events with gross rese	(a) Event #1 Heschel Awards (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts		53,154		0	53,154
Re	3	Less: Charitable contributions	46,817	0	0	46,817
		minus line 2) .	6,337	0	0	6,337
Direct Expenses	4	Cash prizes	0	0	0	0
	5	Noncash prizes	0	0	0	0
	6	Rent/facility costs	0	0	0	0
t Exp	7	Food and beverages	0	0	0	0
Direc	8	Entertainment	0	0	0	0
	9	Other direct expenses	6,337	0	0	6,337
	10 11 irt II	Net income summary. Combi	ne line 3, column (d), an	d line 10		(6,337) 0
re	ЩЧШ	than \$15,000 on Form		sied les to loini 550	5, 1 art 10, mio 15, or 10	ported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue			···	0
ses	2	Cash prizes				0
Expe	3	Noncash prizes				0
Direct Expenses	4	Rent/facility costs			······································	0
<u> </u>	5_	Other direct expenses				0
	6	Volunteer labor	☐ Yes % ☐ No	Yes %	Yes %	-
	7	Direct expense summary. Ad	d lines 2 through 5 in co	lumn (d)	•	(0)
	8	Net gaming income summary	. Combine line 1, colum	n d, and line 7 .		0
g	9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states?					
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes				. Yes No		

Schedi	ule G (Farm 990 or 990-EZ) 2011 JEWS UNITED FOR JUSTICE INC	<u>52-</u>	2346578	3 Page 3
11 ·	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity operated in:	İ		_
а	The organization's facility	13a		%
b	An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.	;		
	Name ▶	. .		
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	ļ	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization \triangleright \$ 0 and the amount of gaming revenue retained by the third party \triangleright \$ 0.	•		
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ►			
16	Gaming manager information:			
	Name ▶	· 		
	Gaming manager compensation > \$0			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	1	_	_
b	retain the state gaming license?	l	Yes	_
Part	or spent in the organization's own exempt activities during the tax year ► \$ Supplemental Information. Complete this part to provide the explanations required by Part 1.	art I I	ine 2h	Columns
, arc	(iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete provide any additional information (see instructions).			
		. 		·

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Employer identification number

2011

Department of the Treasury Internal Revenue Service Name of the organization 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.

Open to Public Inspection

JEWS UNITED FOR JUSTICE	52-2346578
Form 990 Part VI Question 11: The 990 form has been circulated to all board members and they have	had the opportunity to raise questions
before the Form 990 was submitted.	
Form 990 Part VI Question 19: The organization's governing documents, conflict of interest policy an	d financial statements are available
to the public on request	
Form 990 Part XI Line 5 2010 Net Assets of 103400 were overstated and needed to be adjusted by (\$7	13)
	

Where to File (990)					
DC Enter the state's abbreviation.					
If the organization's principal business,	Mail to this Address:				
office, or agency is located in:					
Note: The first line of the address should be Department of the	e Treasury.				
Note: The second line of the address should be Internal Rever	nue Service Center.				
Inside the United States	Internal Revenue Service Center Ogden, UT 84201-0027				
U.S. Possession or Foreign Country	Internal Revenue Service Center P.O. Box 409101 Ogden, UT 84409				