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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(e)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1645-0047

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

<u> </u>	F	or the 2	2011 calendar year, or tax year beginning $JUL~1$, $~2011$ and e	nding J	UN 30, 2012	
В	Cr	eck if	C Name of organization		D Employer identifi	cation number
	æp		CHICAGOLAND JEWISH HIGH SCHOOL			
[Address change	ENDOWMENT FUND			
Ī		Name change	Doing Business As		20-3	088136
Ī		Initial roturn		Room/suite	E Telephone numbe	
Ĭ	==	Termin- ated	1095 LAKE COOK ROAD			<u>470-6</u> 700
Ī		Amended			G Gross receipts \$	2,539,856.
ř		Ireturn Applica-	DEERFIELD, IL 60015		H(a) Is this a group re	
ι		Jtibn pending	F Name and address of principal officer LYNN WIZNITZER		for affiliates?	
			SAME AS C ABOVE		l .	Yes X No
-	_			r 527	H(b) Are all affiliates ind	
J				327		list. (see instructions)
			roanization: X Corporation Trust Association Other	- Vone	H(c) Group exemption	
			Automatical Control of the Control o		of formation: 2006 [State of legal domicile: IL
L	Pa		Summary	NID OLD (****
	8		riefly describe the organization's mission or most significant activities: THE E			HOLDS,
	Ě		NVESTS, AND THEN ALLOCATES RESOURCES TO			
	E		heck this box if the organization discontinued its operations or dispose	ed of more	1	ssets
	Activities & Governance		umber of voting members of the governing body (Part VI, line 1a)		<u>3</u>	<u>7</u>
,	∞ ∞		umber of independent voting members of the governing body (Part VI, line 1b)		4	7
م	es		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
ינונ ה	ጀ		otal number of volunteers (estimate if necessary)		<u>6</u>	
Ď	둫	7 a To	otal unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
		b N	et unrelated business taxable Income from Form 990-T, line 34	 	7b	0.
Ħ			A	ļ	Prior Year	Current Year
ij	ا يو	8 C	ontributions and grants (Part VIII, line 1h)	·	579,942.	397,501.
_	Revenue		rogram service revenue (Part VIII, line 2g)	<i>.\</i>	0.	0.
=	١٥	10 In	vestment income (Part VIII, column (A), lines 3, 4, and 70)	2\	<u> 175,249.</u>	173,516.
_ ခ	"	11 0	ther revenue (Mart VIII, Column (A), intes 5, 00, 50; 50, 100, 100	%\	0.	0.
→ -		12 To	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), Ima V2)	(%)	755,191.	571,017.
			tarround difficultie para francis in granting granting and the second	<u> </u>	147,642.	951,485.
201⊋		14 B	enefits paid to or for members (Part IX, column (A)-like 4)(A)	<u>ال</u> م ا	0.	0.
<u>.</u>	ا بي	15 S	alaries, other compensation, employee benefits (Ran X, column A), (in est 5, 10)		0.	0.
	Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 119)	[0.	0.
	8	ь То	otal fundraising expenses (Part IX, column (D), line 25)	0.		
	Δ		ther expenses (Part IX, column (A), lines 11a-11d, 11f24e)		19,155.	19,873.
			otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		166,797.	
			evenue less expenses. Subtract line 18 from line 12		588,394.	<400,341.>
5	≥8			Be	ginning of Current Year	End of Year
ą	Fund Balances	20 Te	otal assets (Part X, line 16)	1.33	7,734,687.	7,441,928.
V	絕		otal liabilities (Part X, line 26)	· ·	0.	0.
Į,	털티		et assets or fund balances Subtract line 21 from line 20		7,734,687.	7,441,928.
F	Pa		Signature Block		<u> </u>	7,441,720.
			es of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the hest of m	W knowledge and ballet it is
			and complete. Declaration of preparer (other than officer) is based on all information of while			, and anough and belief, it is
-	, 40,	1	MUMMAL	on properor	1 3/1	1/13
	Sigr	.	Signature di officer	-	Date	
	ler	Ι.	LYNN WIZNITZER, PRESIDENT			
•		1	Type or print name and title			
-			Print/Type preparer's name Print/Type preparer's signature	// \[Date Check	PTIN
F	ald		ARCY STEINDLER	LLI.	5 114.13 If self-employ	P00573131
		F-	irm's name MANN. WEITZ & ASSOCIATES L.L.C.	- 15	Firm's EIN	36-3963131
	•		irm's address 111 DEER LAKE ROAD, SULTE 125	_		
		٠ ا	DEERFIELD, IL 60015		Phone no. (847)267-3400
- N	Mav	the IRS	6 discuss this return with the preparer shown above? (see instructions)		1. 330.00	. X Yes No
÷	200	. 01.00	12 I HA For Panerwork Reduction Act Notice see the separate instruction	ne		Form QQ ()(2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$

Total program service expenses ▶ 951,485.

Form **990** (2011)

<u>4e</u>

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Form 990 (2011) ENDOWMENT FU
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	<u>X</u>	
2	is the organization required to complete Schedule B, Schedule of Contributors?	_2	Х	
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_		<u>X</u>
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 98-197 If "Yes," complete Schedule C, Part III	5		<u>X</u>
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		<u> X</u>
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_		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide	_		.,
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_	 -	<u>X</u>
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			İ
	as applicable.	-		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	440		X _
	Part VI	. 11a		A -
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11b		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	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	<u> </u>		
d	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ <u>.</u>	Х
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	1		
	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	<u> </u>	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,	l <u>.</u> _		,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			7.7
	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	19		X
20a		20a 20b		 ^
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990	(2011)

Form 990 (2011) ENDOWMENT FUND

Part 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	<u>X</u>	<u> </u>
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_		<u>X</u> _
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			v
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			.
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
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	051		.
	Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	000		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	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.	27		X
	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		
28	instructions for applicable filing thresholds, conditions, and exceptions)	1		
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	,	X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
02	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<u> </u>
~	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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	The state of the s			
~	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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		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 VI	37		Х
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	<u> </u>
		Form	990	(2011)

20-3088136

Part V Statements Regarding Other IRS Filings and Tax Compliance

Section Sect		Check if Schedule O Contains a response to any question in this rail v				
be Enter the number of Forms W2G included in line 1a. Enter 0-if not applicable					Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. If all least one is reported on line 23, did the organization file all required federal employment tax returns? Note, if the sum of lines is and 2 as is greater than 250, you may be required to e-file (see instructions). By the vision is a sum of lines is and 2 as is greater than 250, you may be required to e-file (see instructions). By the vision is a sum of lines is and 2 as is greater than 250, you may be required to e-file (see instructions). By the vision is a sum of lines is and 2 as is greater than 250, you may be required to e-file (see instructions). By the vision is a sum of lines is an interest in, or a signature or other authority over, a renancial account is a foreign country. By the vision is a file of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision of the vision is a park to a prohibit of the vision is a park to a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a prohibit of the vision is a park to a park and principle of the organization solic target. By the vision is a park to a prohibit of the vision of						
Gambing) wnnings to prize winners? 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 by If a least on a sincepted on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2 a signature with the year covered by this return of lines 1a and 2 a signature or the 2b, 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? 3b If Yes, 1 and 1 file a form 900 Thor file year If 17-b, "provide an explanation in Schedule 0 4a A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? 4b If Yes, 1 and 1 file a form 900 Thor file year If 17-b, "provide an explanation in Schedule 0 5b If Yes, 1 and 1 file a form 900 Thor file year If 17-b, "provide an explanation of 100 or other financial accounts? 5c If Yes, 1 file the sum of the foreign country Security 1 file year Security 1 file ye			<u>'5</u>			
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, teled for the calendary year ending with or within the year covered by this return. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Ust the organization have unrelated business gross income of \$1,000 or more during the year? 3a X X b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0 4b At any time the man end for the foreign country (such as a bank account, securities account, or other financial account/? 4b If "Yes," enter the manne of the foreign country (such as a bank account, securities account, or other financial account/? 5b Was the organization are year, did the organization was nitred in the financial account/? 5c If "Yes," to line 5a or 5b, did the organization that if was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8896-T? 5c If "Yes," to line 5a or 5b, did the organization file Form 8896-T? 5c If "Yes," to line 5a or 5b, did the organization file Form 8896-T? 5c If "Yes," to line 5a or 5b, did the organization file Form 8896-T? 5c If "Yes," to line 5a or 5b, did the organization file form 8896-T? 5c If "Yes," to line 5a or 5b, did the organization file form 8896-T? 5c If "Yes," to line 6a organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Organizations that may receive deductible contributions under section 170(c). 6d If "Yes," indicate the number of Forms 8826 Red dump flay account of the value of the goods or services provided? 6d If "Yes," indicate the number of Forms 8826 Red dump flay year 6d If "Yes," indicate the number of Forms 8826 Red dump flay year 6d If the organization received a contribution of current, to a	С	- · · · · · · · · · · · · · · · · · · ·	sportable garming	10		
five calendary year ending with or within the year covered by this return 2a	٥.			10		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 30 bd the organization have unrelated business gross income of \$1,000 or more during the year? 31 bd 1 "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0 32 bd 4A any time during the calendary 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)? 32 bd 1 "Yes," after the name of the foreign country ▶ 33 ce instructions for filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts 34 bd 1 "Yes," to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction at any time during the tax year? 35 bd 1 "Yes," to line 5a or 5b, did the organization file Form 8886+17 36 color this property of the organization and that It was or is a party to a prohibited tax shelter transaction at any time during the tax year? 36 color this property of the organization and the organization shelt are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 37 bd 1 "Yes," ided the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 38 bd 1 "Yes," ided the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 39 bd 1 "Yes," ided the organization received accomplete the organization and party to goods and services provided to the payor? 40 bd the organization received accomplete organization and party to goods and services provided to the payor? 41 bd the organization received accomplete organization and party to goods and services provided to the payor? 42 bd 1 "Yes," included on party that denote the poods or services provided? 43 bd 1 "Yes," to include	2a		22 0			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3	L	· · · · · · · · · · · · · · · · · · ·		2h		
3a De the organization have unrelated business gross income of \$1,000 or more during the year? b if Yes,* has it filed a Form 990-T for this year? if Yeb,* provide an explanation in Schedule O 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 leuch as a bank account, securities account, or other financial accountly. See enstructions for filing requirements for Form TD F 90/21, Report of Foreign Bank and Financial Accounts 8 Was the organization aperty to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that, it was or is a party to a prohibited tax shelter transaction? 5 If Yes,* to line 5 a or 5b, did the organization that if Form 8886-T? 8 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? 9 If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(c). 10 If the organization that may receive deductible contributions under section 170(c). 2 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? 7 Organizations that may receive deductible contributions under section 170(c). 2 Did the organization receive a proment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 If Yes,* did the organization of the donor of the value of the goods or services provided? 10 If the organization receive a property of the donor of the value of the goods or services provided? 11 Yes,* did the organization received a contribution of qualified intellectual property, did the organization for late of the payor of the payor of the	D					· · · · ·
b if "Yes," has it filed a Form 990-T for this year? if "No," provide an explanation in Schedule O 4a At any time during the calendary year, did the origination 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 accountly? 5b 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 originization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the originization file Form 8886-1? 5c Did any taxable party notify the originization file Form 8886-1? 5c Did any taxable party notify the originization file Form 8886-1? 5c Did so sithe originization have annual gross receipts that are normally greater than \$100,000, and did the originization solicit any contributions that were not tax deductible? 5c Did the originization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the originization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Originization shall may receive deductible contributions under section 170(c). 8d If "Yes," did the originization notify the done of the value of the goods or services provided? 9 Ut Yes," indicate the number of Forms 8282 filed during the year. 9 Ut the originization during the year, pay premiums, directly or indirectly, or a personal benefit contract? 9 Ut the originization received a contribution of cars, boats, anjanes, or other vehicles, did the originization of the payor? 9 Sponsoring originization maintaining donor advised funds and section 598(a) supporting originizations. Did the supporting originizations maintaining donor advised funds. 9 Did the originization received a contribution of cars, boats, anjanes, or other vehicles, did the originiz	32	•	,	3a		х
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9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b	Ü			8	'	
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	9		, ,			
b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13b 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				9a		
10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves any payments for indoor tanning services during the tax year? b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b			9b		
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a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X It is a stified a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1	
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Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 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 14b				42-	 	
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c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b		_{13b}			
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	_			1		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	140			14a		х
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response to any question in this Part VI					LX.
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	7			
	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.			1		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	7	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p 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	e direc	t 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 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		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 a	ppoint	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or	1		
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			
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 real	ached a	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			. 9		. X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	evenu	Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapter	s, 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 boo	ly befo	re filing the form?	11a	X	
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		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to con	flicts?	12b		ļ
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe			
	ın Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		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 approve	al by ır	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?)		ļ		
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization		-	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			,		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	nth a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its p	articipation	<u> </u>]
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıo	n's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure		-			
17	List the states with which a copy of this Form 990 is required to be filed ▶IL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	on 501(c)(3)s only)	avaılat	le	
	for public inspection. Indicate how you made these available. Check all that apply				_	
	Own website Another's website X Upon request				-	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	of interest policy, ar	id finar	ncıal	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd rec	ords of the organiza	tion 🕨	-	
	ROBERT KRAKOWSKY - 847-470-6700					
	1095 LAKE COOK ROAD, DEERFIELD, IL 60015					

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,

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

X Check this box if neither the organization in	or any related	orga	anıza	ition	cor	nper	nsat	ed any current officer, o	director, or trustee	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	on is both an ector/trustee)		compensation	compensation	amount of
	week	-	CGI 21		100.0	1		from the	from related organizations	other compensation
	(describe hours for	Individual trustee or director				_			(W-2/1099-MISC)	from the
	related	iee or	stee			nsate		(W-2/1099-MISC)	(** = *********************************	organization
	organizations	Itrust	al tru		è e	E .				and related
	in Schedule	Mdua	Institutional trustee	5	Key employee	Highest compensated employee	핕			organizations
	0)	글	IS.	Officer	ē.	₹5	휻		-	
(1) DAVID FISHBAUM			-			-				
TREASURER	0.30	X	<u> </u>	X		Ì		0.	0.	0.
(2) ALAN FRANKEL										•
SECRETARY	0.30	X	\vdash	X	-	├	<u> </u>	0.	0.	0.
(3) ETHAN BUDIN	0.30	,,		٠,,						^
ASSISTANT SEC/TREASURER	0.30	X	-	X		-	ļ.—	0.	0.	0.
(4) MICHAEL SMALL	0.20								0.	0
DIRECTOR	0.30	X	 				-	0.	<u> </u>	0.
(5) STUART TAUSSIG	0.30	١,,							0.	^
DIRECTOR	0.30	<u> </u>	╁	 		 	-	0.	0.	0.
(6) MITCHELL FEIGER	0.30							0.	0.	0.
DIRECTOR	0.30	^		 		-		<u> </u>	0.	<u> </u>
(7) LYNN WIZNITZER	0.30	v		x				0.	0.	0.
PRESIDENT	0.30	 ^		^		├	-	0.	0.	0.
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	990 (2011) ENDOWMENT t VII Section A. Officers, Directors, Tru					1	l: aula		Commonated Employ	20-308	301.) 0	ra	ge 8
rai			npic	yee	s, a ((ilgn	est				(F	=\	
	(A) Name and title	(B) Average hours per week	box	not c , unle	Pos heck ss pe	ntion more	than s bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related		Estimated amount of other		
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W·2/1099-MISC)	from from organi and re organiz	the zation	on d
			_				_				-			
											ļ			
_					_	-	-	_	—					_
							L		0.		0.			_
С	Sub-total Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A					>		0.		0.			0.
2	Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bove	e) wi	ho re		0,000 of reportable	<u> </u>			
_	compensation from the organization						•							(
									- -			Y	es	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150									the organization		4		x
5	Did any person listed on line 1a receive or a									ridual for services				
	rendered to the organization? If "Yes," com	plete Schedui	le J	for s	uch	per	son					5		X
	ction B. Independent Contractors Complete this table for your five highest co	mpopostod in	don	ond:	ont c	ont	racti	ore t	hat received more than	\$100,000 of comp	enesti	on from	n	
1	the organization Report compensation for										Onoati	J. 11 (1)		
	(A) Name and business			ON					(B) Description of s		Con	(C) npensa	ation	١

Form **990** (2011)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

20-3088136

Part VIII Statement of Revenue (D) Revenue (B) (C) (A) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 1 a Federated campaigns 1a **b** Membership dues 1b Fundraising events 1c 1d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and 397,501 similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ 397,501 h Total. Add lines 1a-1f **Business Code** Program Service 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 177,366. 177,366. other similar amounts) _Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents Less rental expenses Rental income or (loss) Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 1964989 assets other than inventory b Less cost or other basis 1968839 and sales expenses <3,850. c Gain or (loss) <3,850.> <3,850·> d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a All other revenue e Total, Add lines 11a-11d 017 173,516. Total revenue. See instructions. Form **990** (2011)

Form 990 (2011)

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 respon	ise to any question in th	s 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	951,485.	951,485.		
2	Grants and other assistance to individuals in				-
_	the United States See Part IV, line 22			·_	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16 Benefits paid to or for members				
4	Compensation of current officers, directors,				
5	trustees, and key employees				
6	Compensation not included above, to disqualified				
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages		- <u>-</u>		
8	Pension plan accruals and contributions (include				
Ü	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits			-	
10	Payroll taxes				
_11 _					
	Management				
	Legal			•	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			· · · · · · · · · · · · · · · · · · ·	
f	Investment management fees	19,843.		19,843.	
g	Other				
12	Advertising and promotion				
13	Office expenses	30.		30.	
14	Information technology	<u>.</u>			
15	Royalties				
16	Occupancy				
17	Travel	-	-		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		<u> </u>		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			**	
23 24	Insurance Other expenses, Itemize expenses not covered	· · · ·		<u> </u>	
24	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.)				
а					
b					
c					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	971,358.	951,485.	19,873.	0.
26	Joint costs Complete this line only if the 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)				<u> </u>

ENDOWMENT FUND Form 990 (2011) **Balance Sheet** Part X (A) (B) End of year Beginning of year 1 Cash · non-interest-bearing 2,329,081 1,760,811. 2 2 Savings and temporary cash investments 173,166. 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L 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) Assets 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 10c 5,047,683. 5,501,863. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 184,757. 179,254. 15 Other assets See Part IV, line 11 _ 15 7,441,928. 7,734,687. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 7,098,340. <u>7,190,938.</u> Unrestricted net assets 27 636,347. 250,990. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 7,734,687. 7,441,928. 33 Total net assets or fund balances

> 7,441,928. Form 990 (2011)

7.734.687

Total liabilities and net assets/fund balances

Form **990** (2011)

LOIII.	1990 (2011) ENDOWMENT FOND			10 :=
Pa	rt XI 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)			<u> 17.</u>
2	Total expenses (must equal Part IX, column (A), line 25)			<u>58.</u>
3	Revenue less expenses Subtract line 2 from line 1			<u>41.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<u>,73</u>	<u>4,6</u>	<u>87.</u>
5	Other changes in net assets or fund balances (explain in Schedule O) . 5	10	<u>7,5</u>	<u>82.</u>
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 7	, 44	<u>1,9</u>	<u> 28.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			Щ.
			Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u>X</u>
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis X Both consolidated and separate basis			
За	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		X
b	lf "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		_	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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.

CHICAGOLAND JEWISH HIGH SCHOOL

Employer identification number

		ENDOWME	NT FUND						20	-3088	136	
Part I	Reason	for Public Chari	ty Status (All organiz	ations mu	st complet	e this par	t) See inst	tructions				
The organ	zation is not a	private foundation b	pecause it is (For lines 1	through '	11, check d	only one b	ox)					
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(ı)	١.				
2 🗀	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🔲	A hospital or	a cooperative hospit	al service organization o	described	n section	170(b)(1)	(A)(iii).					
4 🗔	A medical res	search organization o	perated in conjunction	with a hos	pıtal descr	nbed in se	ection 170	(b)(1)(A)(ii	ii). Enter th	e hospital	's name	} ,
	city, and state		<u></u>									
5	=		penefit of a college or ur	niversity ov	wned or op	erated by	a governr	mental un	it describe	nı b		
. \square		(b)(1)(A)(iv). (Comple				470/11/	41/41/1					
6	· ·	•	ent or governmental unit					6				
7 LX	•	•	eives a substantial part	of its supp	ort from a	governme	entai unit o	r from the	e generai pi	Joile desc	ribea 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										.		
9 📖	_	-	eives. (1) more than 33 1									
		·	nctions - subject to certa									
			axable income (less sect	lion 511 ta	x) Iroin bu	SII 162262 (acquired D	y trie orga	anization ai	ter June 3	JU, 1975	,
40		509(a)(2). (Complete	erated exclusively to te	et for nubl	ic eafaty S	ea cactic	n 500(a)(4	1)				
10	-	_	perated exclusively for the						v out the r	urnoses c	of one o	r
11	-	-	itions described in section									
			organization and comple				-, 000 00 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(4)(6). 6.16.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	a Type I	· · · · —	- -		e III - Func		tegrated		dП	Type III - (Other	
e 🗀			t the organization is not	• -		=	-	r more dis		• .		i
<u> </u>		•	nan one or more publicly									
f		_	ten determination from t						- (-7()		.,,,	
•	•	rganization, check th			•		,					
g	• • •	_	rganization accepted ar	ny gift or c	ontribution	from any	of the follo	owing per	sons?			
3			rectly controls, either al								Yes	No
			apported organization?							11g(i)		
	(ii) A family	member of a persor	described in (i) above?							11g(ii)		
	(iii) A 35% (controlled entity of a	person described in (i) o	or (ii) abovi	97					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s)							
								•				
(i) Name	of supported	(ii) EIN	(iii) Type of		organization			(vi) Is organizati	s the	(vii) An	nount of	
	anization	` '	organization (described on lines 1-9	, , ,	sted in your		tion in col.	(i) organiz	zed in the l		port	
			above or IRC section		document?		r support?	U.S	5.7			
			(see instructions))	Yes	No	Yes	No	Yes	No			
	· -											
· · · · · ·					 				 			
								ļ				
					-							
Total				L				<u>L</u>				

132021 01-24-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

LHA For Paperwork Reduction Act Notice, see the Instructions for

CHICAGOLAND JEWISH HIGH SCHOOL

Schedule A (Form 990 or 990-EZ) 2011 ENDOWMENT FUND 20-3088136 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
	Gifts, grants, contributions, and						_		
	membership fees received (Do not								
	include any "unusual grants.")	51,500.	953,082.	179,657.	579,942.	397,501.	2161682.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities]					
	furnished by a governmental unit to		1						
	the organization without charge								
4	Total. Add lines 1 through 3	51,500.	953,082.	179,657.	579,942.	397,501.	2161682.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included	ļ							
	on line 1 that exceeds 2% of the						ı		
	amount shown on line 11,		-				ı		
	column (f)						1470182.		
_6	Public support. Subtract line 5 from line 4						691,500.		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	_ (a) 2007 _	(b) 2008 – -	- (c) 2009	- (d) 2010	(e) 2011	- (f) -Total		
	Amounts from line 4	51,500.	953,082.		579,942.	397,501.	2161682.		
8	Gross income from interest,								
	dividends, payments received on						1		
	securities loans, rents, royalties						1		
	and income from similar sources	487,166.	369,129.	139,778.	208,866.	<u>177,3</u> 66.	1382305.		
9	Net income from unrelated business								
-	activities, whether or not the	l							
	business is regularly carried on	<u> </u>	<u></u>						
10	Other income Do not include gain								
_	or loss from the sale of capital								
	assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10						3543987.		
	Gross receipts from related activities,	etc (see instruction	ons)			12			
	First five years. If the Form 990 is for			d, fourth, or fifth ta	ax year as a section	n 501(c)(3)			
	organization, check this box and stor	here							
Se	ction C. Computation of Publ		rcentage						
14	Public support percentage for 2011 (I	line 6, column (f) di	ivided by line 11, o	column (f))		14	19.51 %		
15	Public support percentage from 2010) Schedule A, Part	II, line 14		ļ	15	46.47 %		
16a	a 33 1/3% support test - 2011. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons		
t	33 1/3% support test - 2010. If the c	organization did no	ot check a box on i	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th			
	and stop here. The organization qual						$\triangleright \mathbf{X}$		
17a	10% -facts-and-circumstances tes				∍ 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac								
	meets the "facts-and-circumstances"					-	ightharpoons		
Ŀ	o 10% -facts-and-circumstances tes		•		-	17a, and line 15 is	10% or		
•	more, and if the organization meets the	_							
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.								
_18							s >		
<u> </u>	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2011								

Schedule A (Form 990 or 990-EZ) 2011 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	ction 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 ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-				•		
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						_
J	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
7 6	3 received from disqualified persons						
	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	· · · · · · · · · · · · · · · · · · ·					
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6) ction B. Total Support			L	1		
		4) 0007	4,0000	(-) 0000	4-0.0010	(-) 0011	(O Takal
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6	-			 		
108	a Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			<u> </u>			
	Add lines 10a and 10b				ļ		
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carned on						
12	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)		_				
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thii	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here						
Se	ction C. Computation of Publ	ic Support Pe	rcentage		·	 	
15	Public support percentage for 2011 (line 8, column (f) d	livided by line 13, o	column (f))		15	%
<u>16</u>	Public support percentage from 2010) Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20)11 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2010 Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2011. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	-					ightharpoons
ı	o 33 1/3% support tests - 2010. If the						and
	line 18 is not more than 33 1/3%, che	-					ightharpoons
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	▶ □

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

CHICAGOLAND JEWISH HIGH SCHOOL ENDOWMENT FUND

Employer identification number 20-3088136

Pa	art I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 in donor advise	ed funds
Ū	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		used only
Ü	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
P	art II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certif	-
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form o	of a conservation easement on the last
_	day of the tax year		
	day of the tax year		Held at the End of the Tax Year
	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str	ructure included in (a)	2c
	d Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3		leased, extinguished, or terminated by the	organization during the tax
_	year►		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		uring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and		
8			
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements		
P	art III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1	a If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherar	nce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr	ibes these items	
	b If the organization elected, as permitted under SFAS 116 (As	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2		easures, or other similar assets for financial	
	the following amounts required to be reported under SFAS 1		
	a Revenues included in Form 990, Part VIII, line 1		> \$
	b Assets included in Form 990, Part X		\$

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Schedule D (Form 990) 2011

CHICAGOLAND JEWISH HIGH SCHOOL

	dule D (Form 990) 2011 ENDOWME:					<u> 20-30</u>			
Par									
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a s	significant	use of its	collectio	n item	s
	(check all that apply)								
а	Public exhibition	d	Loan or exc	hange programs					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further tl	ne organization's exe	empt purp	ose in Par	t XIV		
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or other simila	ır assets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?			Yes		No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" to	Form 990), Part IV, I	line 9, or	•	
	reported an amount on Form 990, Pa	rt X, line 21							
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contribution	s or other assets no	t included				
	on Form 990, Part X?						Yes] No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table						
	, ,						Amour	ıt	
С	Beginning balance				1c				
	Additions during the year				1d				
e	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				Yes		No
	If "Yes," explain the arrangement in Part XIV						_		
Par			swered "Yes" to Fo	rm 990, Part IV, line	10	,			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Fou	r years	back
1a	Beginning of year balance	7,098,340.	6,712,477.	6,806,598.	8,8	846,895.			
	Contributions	_ 782 858.	_ 448_167,	173_167.		7-70-452,			
	Net investment earnings, gains, and losses	261,255,	85,571.	283,242,	<1.	735.749.	>		
	Grants or scholarships	951,485.	147,642.	550,000.	1	075,000.			
	Other expenditures for facilities	,							
_	and programs								-
f	Administrative expenses	30.	233.	530.		_			
a	End of year balance	7,190,938.	7.098.340.	6,712,477.	6.4	306,598.			
2	Provide the estimated percentage of the cur				·				
a	Board designated or quasi-endowment		%						
h	Permanent endowment ▶	%	_						
c	Temporarily restricted endowment ▶								
Ū	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.							
3a	Are there endowment funds not in the posse		ation that are held a	nd administered for	the organi	zation			
-	by	J			_			Yes	No
	(i) unrelated organizations						3a(i)		X
	(ii) related organizations						3a(ii)		X
h	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Schedule R?				3b		
4	Describe in Part XIV the intended uses of the								
Par	t VI Land, Buildings, and Equipn								
	Description of property	(a) Cost or o		or other (c)	Accumulat	ed	(d) Boo	k valu	— е
	becomplied of property	basis (investr			epreciation		(-, -)		
12	Land								
	Buildings		<u> </u>						
2	Leasehold improvements				-		_		
ر م	Equipment	-							
	Other								
	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990 Part	X. column (B) line 1	(O(c).)					0.
ıvıd	rad mico ra unibugii ip. (ppidiriii juj must t	again on in ooo, i ait	, cc.c D/j III.O I	- \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ - \ \ - \ - \ - \ - \ - \ - \ - \ \ - \ - \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ - \ \ \ - \ \ \ - \ \ - \ \ \ - \ \ - \ \ \ - \ \ - \ \ \ - \ \ - \ \ \ - \ \ \ - \ \ \ - \ \ \ - \ \ \ \ - \ \ \ \ - \ \ \ \ - \ \ \ \ \ - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					

Schedule D (Form 990) 2011

Part VII Investments - Other Securities.	See Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(G)	 		
(H)		· · · · · · · · · · · · · · · · · · ·	
(1)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
(1)			
(2)			
(3)			
(4)			
(6)			<u> </u>
(7)	 - 		
(8)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			· · · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, Part X, Irr	ne 15		
	a) Description		(b) Book value
(1)			
(2)			
(3)			
(5)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, col (B) li	no 15 l		
Part X Other Liabilities. See Form 990, Part X	X line 25		
1 (a) Description of liability		Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col (B) In FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote 2. FIN 48 (ASC 740)	o to the organization's financial statements	that reports the organization's liability for un	certain tax positions under

PART X, LINE 2: AS OF JUNE 30, 2012, THE ENDOWMENT FUND HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2011

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization CHICAGOLAND JEWISH ENDOWMENT FIND	ND JEWISH FIND	HIGH SCHOOL	J.C	_ _			Employer identification number 20-3088136
Part I General Information on Grants and Assistance	nd Assistance			_			
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	e amount of the grants	s or assistance, the	grantees' eligibility	y for the grants or ass	sistance, and the selec	[
criteria used to award the grants or assistance?	stance?			-			Yes X No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	toring the use of grant	t funds in the United	d States			
[神道道道] Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any section 21, for any section 21, for any section 3 part IV.	Governments an	d Organizations in the	e United States. C	complete if the organian \$5 000.	anization answered "\	res" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, PMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHICAGOLAND CONSERVATIVE JEWISH HIGH SCHOOL FOUNDATION - 1095 LAKE COOK ROAD - DEERFIELD II, 60015	36-4167962	501 (C)(3)	951 485.				TO SUPPORT THE CHICAGOLAND JEWISH HIGH SCHOOL AND ITS PROGRAMS,
			7				
			-				
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3. Enter total number of other parameters listed in the line 1 table.	ind government or	rganizations listed in the	he line 1 table				1.
1 -	, see the Instruct	tions for Form 990.					Schedule I (Form 990) (2011)

CHICAGOLAND JEWISH HIGH SCHOOL

Schedule I (Form 990) (2011) ENDOWMENT FUND

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III Grants and Other Assistance to Individuals in the United States.

Page 2

20-3088136

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the informatio	in required in Part I,	line 2, and any other	additional information.	
			-		
132 102 01-27-12		25			Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

CHICAGOLAND JEWISH HIGH SCHOOL ENDOWMENT FUND

Employer identification number 20 – 3088136

ENDOWNENT TOND
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CONSERVATIVE JEWISH HIGH SCHOOL FOUNDATION.
FORM 990, PART VI, SECTION A, LINE 2: LYNN WIZNITZER AND MITCH FEIGER ARE
SIBLINGS.
FORM 990, PART VI, SECTION B, LINE 11: A DRAFT OF THE 990 WAS PROVIDED TO
THE BOARD FOR REVIEW AND COMMENTS BEFORE IT WAS FILED.
FORM 990, PART VI, SECTION B, LINE 15: FORM 990, PART VI, SECTION B, LINE
15: THERE ARE NO EMPLOYEES OR COMPENSATED BOARD MEMBERS.
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE AVAILABLE UPON
REQUEST TO THE PUBLIC.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:
NET UNREALIZED GAINS ON INVESTMENTS: 107,582.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011 Open to Public Inspection **Employer Identification number** 20-3088136

(Form 990)		► Complete if the or	te if the organization answered "Ye	ganization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.	3, 34, 35, 36, or 37	. •	Open to Publ
Departmen Internal Rev	Department of the Treasury Internal Beverue Service	•	► Attach to Form 990.	▶ See separate instructions.	ns.		Inspection
Name of	Name of the organization	CHICAGOLAND JEWISH ENDOWMENT FUND	MISH HIGH SCHOOL	-		Emp 2	Employer identification num 20-3088136
Pärki	Identification of	Disregarded Entities (Complete	Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)	o Form 990, Part'IV, line 33)			
	Name, adc	(a) Name, address, and EiN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II	Identification of Related Tax-Ex organizations during the tax year,	Related Tax-Exempt Organizar	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.)	ıswered "Yes" to Form 990, Par	t IV, line 34 becaus	se it had one or more re	lated tax-exempt

	(g) Section 512(b)(13) controlled entity?	S No		×		-	
	(f) Sect Direct controlling entity	Yes				-	
	(e) Public charity status (if section	501(c)(3))		170B(I)(A)(I			
	(d) Exempt Code section			501(C)(3)			
-	(c) Legal domicile (state or foreign country)	-		ILLINOIS	 		
	(b) Primary activity		TO ESTABLISH AND OPERATE A CONSERVATIVE JEWISH HIGH	SCHOOL,			
טוטמווובמנוטווט טטווווט נווס נפא אפמין	(a) Name, address, and EIN of related organization		CHICAGOLAND JEWISH HIGH SCHOOL - 36-4167962 TO ESTABLISH AND OPERATE A COUSE COOK RD CONSERVATIVE JEWISH HIGH	DEERFIELD IL 60015			

132181 01-23-12 LHA

Schedule R (Form 990) 2011

CHICAGOLAND JEWISH HIGH SCHOOL ENDOWMENT FUND Schedule R (Form 990) 2011

Page 2

20-3088136

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

(a)	Q	<u> </u>	(0	(e)	€	(6)	Ξ	©	9	3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	trolling /	Predominant income (related, unrelated, excluded from tax under	Shar	of 'ear s	ortion- ations?	Code V-UBI amount in box 20 of Schedule	General or managing partner?	General or Percentage managing ownership partner?
		country)		641 C-21 C SIIOII298			Yes	לכססו וווססו אין אין	resino	
					-					
									-	
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Part iv Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable as	s a Corpo	oration or Trust (Colvear)	mplete if the organiza	ation answered "Yes"	" to Form 990, Parl	t IV, line 34 t	oecause it had or	le or mor	e related
			a	2	9	(9)	9	(a)		(2)
Name, address, and EIN of related organization	N.		Primary activity	<u> </u>	Direct	Type of entity (C corp, S corp,	Share			Percentage ownership
				foreign country)		or trust)		assets	ets	
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				90				:] !	
132162 01-23-12				97	_			Schedule	R (Forn	Schedule R (Form 990) 2011

CHICAGOLAND JEWISH HIGH SCHOOL ENDOWMENT FUND

Page 3

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Schedule R (Form 990) 2011 ENDOWMENT FUND

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		_			Yes	윋
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	elated organizations listed	ın Parts II-IV?			1
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity		-		1 a		×
b Gift, grant, or capital contribution to related organization(s)					×	
c Gift, grant, or capital contribution from related organization(s)		_		5		×
d Loans or loan quarantees to or for related organization(s)				19		×
				<u></u>		×
f Sale of assets to related organization(s)				#		×
 a Purchase of assets from related organization(s) 		-		19		×
		_		ŧ		×
i Lease of facilities, equipment, or other assets to related organization(s)				; -		×
. I ease of facilities, equipment, or other assets from related organization(s)				;		×
k Performance of services or membership or fundraising solicitations for related organization(s)	janization(s)	-		¥		×
I Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			=	X	
$oldsymbol{m}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)	-		Ę	×	
n Sharing of paid employees with related organization(s)		-		Ę		×
 Reimbursement paid to related organization(s) for expenses 		-		-		×
		-		đ		×
 Q Other transfer of cash or property to related organization(s) 				5		×
		-		7-		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete t	his line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
CHICAGOLAND CONSERVATIVE JEWISH HIGH (1) SCHOOL FOUNDATION	Ф	951,485.	CASH PAID			
(2)						ĺ
6		- –				
(4)						
(5)						
(9)						
132163 01-23-12	29	- -	Schedul	Schedule R (Form 990) 201	n 990)	8

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CHICAGOLAND JEWISH HIGH SCHOOL

ENDOWMENT FUND Schedule R (Form 990) 2011 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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

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(a)	(a)	(c)	(a) (brodominant income	- E	(II) Share of	(g) Share of	Disproper-	Code V-11BI	U) General o	(n) Percentade
Name, address, and Ein of entity	rilliary activity	(state or foreign	(related, unrelated, 501(c)(3) excluded from tax	501(c)(3) 000s 2	total	end-of-year	tionate allocations?	allocations of Schedule K-1 partner ownership	managing partner?	ownership
		country)	under section 512-514) yes	2	il collie	dssels	Yes No	(Form 1065)	Yes No	
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CHICAGOLAND JEWISH HIGH SCHOOL

Schedule R	(Form 990) 2011	ENDOWMENT	FUND	20-3088136	Page 5
Part VII	(Form 990) 2011 Supplemental Infor	mation			
	Complete this port to prov	udo additional inform	nation for responses to questions on Schedule R (see instruc	ctions)	
	Complete this part to prov	viue auditional inform	iation for responses to questions on somedule in [see mistrut	- LIOI 13)	
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