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DLN: 93493134056193

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

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

A Fo	r the 3	2011 cal	endar year, or tax year beginning 07-01-20	11 and ending 06-30-201	.2		<u> </u>		
			C Name of organization	aa chaing 00 00 201		D Employer ider	ntification number		
_	dress ch		THE JEWISH COMMUNITY FOUNDATION			94-6098382			
— Na	me char	nge	Doing Business As			E Telephone nu	mber		
— _{Init}	ial retur	rn -	Number and street (or P O box if mail is not deliv-	ered to street address) Room/s	uite	(510)839-2	900		
– _{Ter}	mınated	d	300 GRAND AVENUE			G Gross receipts \$	4,869,100		
– _{Am}	ended r	return	City or town, state or country, and ZIP + 4		_				
— _{Арі}	olication	pending	OAKLAND, CA 946104826						
		_	F Name and address of principal officei	r	H(a) Is the	s a group return	for		
			LISA TABAK		affilia				
			300 GRAND AVENUE OAKLAND,CA 946104826		H/h) Are all	l affiliates include	sd? □ Yes □ No		
			<u> </u>		1 ' '		(see instructions)		
[Та	x-exem	pt status	▼ 501(c)(3)	4947(a)(1) or 527		p exemption nur			
ı w	ebsite	e: ► WWV	N JFOUND ORG						
K For	m of ord	anization	✓ Corporation Trust Association Other ►		I Year of for	mation 1962 M	State of legal domicile CA		
	rt I	Sumr	· · · · · · · · · · · · · · · · · · ·		E rear or ior	mation 1902 Fi	State of legal dofficile. CA		
			scribe the organization's mission or most s	ignificant activities					
			IDE AN ENDOWMENT FOR THE CONTIN		VICES IN THE	COMMUNITY			
Governance	-								
<u>e</u>	-								
<u> </u>	2	Check thi	s box 🛏 if the organization discontinued i	its operations or disposed	of more than 2	5% of its net as	sets		
	3 1	Number o	f voting members of the governing body (Pa	art VI, line 1a)		з	34		
Activities &			f independent voting members of the gover			4	34		
Ë			nber of individuals employed in calendar yea			5	0		
Ж	6 1	Total num	nber of volunteers (estimate if necessary)			6	34		
đ	7a ⊺	Total unre	elated business revenue from Part VIII, co		7a	0			
	ь	Net unrela	ated business taxable income from Form 99	90-T, line 34		7b	0		
					Prio	r Year	Current Year		
_	8 Contributions and grants (Part VIII, line 1h)					8,401,484	3,108,328		
nie	9	Program service revenue (Part VIII, line 2g)				0	0		
Ravenue	10	Investr	ment income (Part VIII, column (A), lines 3	3,4,and7d)		1,205,073	943,768		
ά	11	Otherr	evenue (Part VIII, column (A), lines 5, 6d,	8c, 9c, 10c, and 11e)		778,990	588,536		
	12		evenue—add lines 8 through 11 (must equa		ie	10,385,547	4,640,632		
	13		and similar amounts paid (Part IX, column			3,759,364	3,429,075		
	14		s paid to or for members (Part IX, column (0	0,123,073		
	15		s, other compensation, employee benefits (
\$		5-10)	,,			621,273	675,002		
Expenses	16a	Profess	sional fundraising fees (Part IX, column (A),	, lıne 11e)		0	0		
ਡੌ	b	Total fun	draising expenses (Part IX, column (D), line 25) 🛌						
	17	Othere	expenses (Part IX, column (A), lines 11a–1	1d,11f-24e)		719,571	659,440		
	18		xpenses Add lines 13–17 (must equal Par			5,100,208	4,763,517		
	19	Revenu	e less expenses Subtract line 18 from line	. 12		5,285,339	-122,885		
Net Assets or Fund Balances						of Current ear	End of Year		
6 de 6	20	Totala	ssets (Part X, line 16)		•	39,091,658	37,253,999		
4.4. 4.4.	21		abilities (Part X, line 26)			420,033	324,962		
<u> </u>	22		sets or fund balances Subtract line 21 from			38,671,625	36,929,037		
Pai	t II		ature Block						
Unde know	r penal	ties of pe	rjury, I declare that I have examined this retur it is true, correct, and complete. Declaration						
		****	*			13-05-14			
Sign		Signat	ure of officer		Da	te			
Her	е		ABAK EXECUTIVE DIRECTOR						
		Type o	or print name and title			_			
		Preparer's		Check if self-	Preparer's taxpay (see instructions)	er identification number			
Paid		signature en months 2 months				P00026968			
-	arer's		me (or yours RINA ACCOUNTANCY CORPORATIO	N I	<u> </u>	' ' 			
Use (Only	ıf self-em address, a	ployed), and ZIP + 4 475 14TH STREET SUITE 1200			EIN • 94-315885			
			OAKIAND CA 94612	Phone no 🕨 (510) 893-6908					

May the IRS discuss this return with the preparer shown above? (see instructions)

▼ Yes **「**No

Par		of Program Servio dule O contains a respo				
FOU	T AROUND THE VALU	TH EAST BAY JEWISH	I DONORS TO RE		TIKKUN OLAM (REPAIF HILANTHROPIC GOALS A	
	,					
2		ındertake any sıgnıfica 990-EZ?			r which were not listed on	┌ Yes ┌ No
	If "Yes," describe the	se new services on Sc	hedule O			
3	services?			nanges in how it co	onducts, any program	┌ Yes ┌ No
	If "Yes," describe the	se changes on Schedu	le O			
4	expenses Section 50	1(c)(3) and 501(c)(4)	organizations an	d section 4947(a	nree largest program servi)(1) trusts are required to ch program service report	report the amount of
4a	(Code) (Expenses \$	730,558 inc	luding grants of \$	730,558) (Revenue	\$)
	GRANTS THAT PROMOTE		HNESS OF JEWISH LIF	E AND WE COLLABOR	RATE WITH THESE ORGANIZATION	IE GREATER EAST BAY TO MAKE DNS AND THEIR DONORS TO CREATE
4b	(Code) (Expenses \$	182,383 Inc	luding grants of \$	182,383) (Revenue	\$)
	IN 1990 AIEF MAKES AN		HICH PROVIDES GRAN	ITS TO SUPPORT SELE	CT EDUCATIONAL PROGRAMS I	RO-ISRAEL LOBBY, AND WAS CREATED NCLUDING MIDDLE EAST RESEARCH,
4c	(Code) (Expenses \$	2,516,134 inc	luding grants of \$	2,516,134) (Revenue	\$)
	MORE THAN 100 DIFFER	TATE JEWISH AGENCIESTHE	JEWISH COMMUNIT ORGANIZATIONS SER	VING PEOPLE LOCALLY	, NATIONALLY AND WORLDWID	, ANNUALLY AWARDS GRANTS TO E THESE DOLLARS ARE AT WORK
4d	Other program servi	ces (Describe in Sche	dule O)			
	(Expenses \$	•	ding grants of \$) (Revenue \$)
4e	Total program service	e expenses ⊁ \$	3,429,075		· · · · · · · · · · · · · · · · · · ·	<u> </u>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> " <i>Yes</i> ," <i>complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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 1	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		N o
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N o
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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 owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		Fo	orm 990	(2011)

	·
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 2	<u> </u>		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	165	
	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?	Ĵ		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	За		Νo
	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 over, a financial account in a foreign country (such as a bank account or securities	1_		
	account)?	4a		No
Ь	If "Yes," enter the name of the foreign country •	-		
	See instructions for ining requirements for Form FBT 30 22 1, Report of Foreign Bunk and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
5a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			NI -
d	file Form 8282?	7c		No
_		1		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g		
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club]		
	facilities Section FO1(a)(12) expenientions Enter			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other	1		
	sources against amounts due or received from them)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	1		
	allocated to each state	13a	<u> </u>	
b	Enter the aggregate 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 aggregate amount of reserves on hand]		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
14	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	_		
	evenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	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?	16b		
Se	ection C. Disclosure	'		
17	List the States with which a copy of this Form 990 is required to be filed▶CA			
17	List the states min min a copy of this form 550 is required to be mear of			

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ANDY WASSERMAN 300 GRAND AVENUE OAKLAND, CA 94610 (510) 839-2900

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	mor unles an	on (d e tha s per offic	n one son er ar	not check one box, on is both and a ustee)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

related organizations in Schedule O) See Additional Data Table See Addit	(A) Name and Title		(B) Average hours per week (describe hours	more unles an	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (D) Reportable compensati from the organization 2/1099-MIS						from related - organizations		(F) Estima amount o compens from t organizati	ited f other sation the on and
1b Sub-Total			for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		PIISC)			
c Total from continuation sheets to Part VII, Section A	See A	ddıtıonal Data Table												
c Total from continuation sheets to Part VII, Section A												+		
c Total from continuation sheets to Part VII, Section A												+		
c Total from continuation sheets to Part VII, Section A	-											+		
c Total from continuation sheets to Part VII, Section A												+		
c Total from continuation sheets to Part VII, Section A							_		_			+		
c Total from continuation sheets to Part VII, Section A												_		
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A												+		
to Total from continuation sheets to Part VII, Section A	1b	Sub-Total							<u> </u> ►		1	+		
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual			to Part VII, Sec	tion A	· ·	÷	<u> </u>		F			+		
\$100,000 of reportable compensation from the organization 13 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	d	Total (add lines 1b and 1c) .							>	150,00	0 203,8	75		36,449
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2						ted	above) who	o received more t	han			
on line 1a? If "Yes," complete Schedule J for such individual											1		Yes	No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3						eye •	mploy •	ee, c	or highest compe	nsated employee	3		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4	For any individual listed on line organization and related organiz	1a, is the sum of	freport	able	com						<u> </u>		NO
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	_		rocowo or occri		·	• •	fror	· ·	· unro	lated organization	n or individual for	4	Yes	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	5									_		5		No
\$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	Se	ction B. Independent Con	tractors											
	1	\$100,000 of compensation from	n the organizatio											
		Nai		dress						De				
												\dashv		

\$100,000 of compensation from the organization $\blacktriangleright 0$

Part V		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
\$ \$	1a	Federated campaigns 1a					
듄두	b	Membership dues 1b					
₽Ğ	С	Fundraising events 1c					
‡ rai	d	Related organizations 1d					
ins Sin	е	- · · · · · ·					
ntio er:	f	All other contributions, gifts, grants, and 1f similar amounts not included above	3,108,328				
ÉĘ	g	Noncash contributions included in					
Contributions, gifts, grants and other similar amounts		lines 1a-1f \$					
ပိုင်း	h	Total. Add lines 1a-1f	►	3,108,328			
œ			Business Code				
ΞĚ	2a						
өлө	ь						
or GE	c						
Z Z	d						
æ							
E	e						
Program Serwce Revenue	f	All other program service revenue					
ΔŤ	g	Total. Add lines 2a-2f					
	3	Investment income (including dividend					
		and other similar amounts)		1,172,236			1,172,236
	4	Income from investment of tax-exempt bond p					
	5	Royalties	• [
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental					
	С	expenses Rental income					
		or (loss)					
	d	Net rental income or (loss)					
	_	(i) Securities	(II) Other				
	7a	Gross amount from sales of					
		assets other than inventory					
	b	Less cost or 228,468 other basis and					
		sales expenses					
	С	Gain or (loss) -228,468					
	d	Net gain or (loss)	▶	-228,468			-228,468
4.	8a	Gross income from fundraising events (not including					
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18					
Ā	ь	Less direct expenses b					
₹	c	Net income or (loss) from fundraising e	vents 🕨				
_	9a	Gross income from gaming activities	ŀ				
		See Part IV, line 19					
		a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activ	ities				
	10a	Gross sales of inventory, less returns and allowances .					
	b	Less cost of goods sold b					
	С	Net income or (loss) from sales of inve	•				
		Miscellaneous Revenue	Business Code				
	11a	ADMINISTRATIVE FEE REV	541900	588,523	588,523		
	ь	MISCELLANEOUS	541900	13	13		
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		F00 F04			
			▶	588,536			
	12	Total revenue. See Instructions	▶	4,640,632	588,536	0	943,768

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)

<u>C</u>	heck if Schedule O contains a response to any question in this Part IX	<u> </u>		<u>l .</u>	
	ot include amounts reported on lines 6b, o, 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	3,429,075	3,429,075		
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	150,000		150,000	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	525,002		525,002	
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				_
 а	Management				
b	Legal	821		821	
c	Accounting	41,100		41,100	
		41,100		41,100	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	68,594		68,594	
g	Other	53,394		53,394	
12	Advertising and promotion	3,893		3,893	
13	Office expenses	54,822		54,822	
14	Information technology				
15	Royalties				
16	Occupancy	46,100		46,100	
17	Travel	3,285		3,285	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,754		4,754	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	19,267		19,267	_
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	ADMINISTRATIVE	305,144		305,144	
Ь	MISCELLANEOUS	35,726		35,726	
С	SECURITIES FEES AND COM	22,540		22,540	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	4,763,517	3,429,075	1,334,442	0
26		4,703,317	3,423,073	1,334,442	
	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
					rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 1,147,143 2 11.317 2 3 3 4 23.101 175.775 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 9 Prepaid expenses and deferred charges 88,216 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 88,216 b Less accumulated depreciation 10c 38,427,049 11 33,593,714 11 12 12 1,239,900 Investments—other securities See Part IV, line 11 13 177,825 13 177,825 Investments—program-related See Part IV, line 11 . . 14 14 452,366 15 919,642 15 39,091,658 37,253,999 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 71,161 17 17 Accounts payable and accrued expenses . 18 348.872 18 324,962 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D 26 420,033 26 324,962 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 38,671,625 27 27 36,929,037 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 38.671.625 33 36.929.037 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 39,091,658 34 37.253.999

Par	Check if Schedule O contains a response to any question in this Part XI			.┏		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4.6	540,632	
2	Total expenses (must equal Part IX, column (A), line 25)	2			, ,63,517	
3	Revenue less expenses Subtract line 2 from line 1	3		- 1	122,88	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		38,671,62		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-1,6	519,703	
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		36,9	929,037	
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			দ		
1	Accounting method used to prepare the Form 990			Yes	No	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c	Yes		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b			

Software ID: Software Version:

EIN: 94-6098382

Name: THE JEWISH COMMUNITY FOUNDATION

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

Compensated Employees, and Independent Contractors									
(B) Average hours		tion	(che	/)			(D) (E) Reportable Reportable compensation compensation from the from related		(F) Estimated amount of other compensation
week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х		х				0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х		х				0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
5 0 0	Х		х				0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х						0	0	0
1 00	Х		Х				0	0	0
1 00	Х						0	0	0
	(B) Average hours per week 1 00 1 00 1 00 1 00 1 00 1 00 1 00 1	(B) Average hours per week Post or cliector 1 00 X 1 00 X <t< td=""><td>(B) Average hours per week Position of that a substitutional Trustee 1 00 X 1 00 X<</td><td>(B) Average hours per week Position (che that apply or linguistion) 1 00 X Individual trustee 1 00 X</td><td> C</td><td> CC</td><td> Co</td><td> C</td><td> Compensation (check all that apply) Position (check all that apply) </td></t<>	(B) Average hours per week Position of that a substitutional Trustee 1 00 X 1 00 X<	(B) Average hours per week Position (che that apply or linguistion) 1 00 X Individual trustee 1 00 X	C	CC	Co	C	Compensation (check all that apply) Position (check all that apply)

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

(A) Name and Title	(B) Average hours		() tion (that a	che		II		(D) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
PAUL WEISS BOARD MEMBER	1 00	Х						0	0	0
RANDY KESSLER BOARD MEMBER	1 00	Х						0	0	0
RICHARD GOODMAN VICE PRESIDENT	1 00	Х		X				0	0	0
ROBERT RUBY BOARD MEMBER	1 00	Х						0	0	0
ROBERTA COHN BOARD MEMBER	1 00	Х						0	0	0
RONALD RUBENSTEIN BOARD MEMBER	1 00	Х						0	0	0
SANFORD COLEN BOARD MEMBER	1 00	Х						0	0	0
STEPHEN GOLDMAN BOARD MEMBER	1 00	Х						0	0	0
STEVE ZATKIN BOARD MEMBER	1 00	Х						0	0	0
LISA TABAK EXECUTIVE DIRECTOR	37 50			Х				150,000	0	10,726
JAMES BRANDT CEO	1 00			Х				0	181,000	25,723
ANDY WASSERMAN CFO	18 80			Х				0	22,875	0

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

THE JEWISH COMMUNITY FOUNDATION

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 section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% 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 Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h

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 organization,

check this box

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons

c Type III - Functionally integrated

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

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (III) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s)

b Type II

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

Type III - Other

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organızatı col (ı) lıst your gove	Is the organization in		Is the organization in col (i) listed in your governing		(v) Did you notify the organization in col (i) of your support?		e on in anized S ?	(vii) A mount of support?
		ınstructions))	Yes	No	Yes	No	Yes	No			
Total											

Type I

h

instructions

Support Schedule for Organizations Described in IRC 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	e organization i	fails to qualify u	inder the tests	listed below, ple	ease cor	nplete l	Part III.)
	ection A. Public Support	1	1	<u> </u>	Г			
cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,817,73	9 3,106,474	1,898,291	2,569,707	3,	,108,328	17,500,539
_	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities							
3	furnished by a governmental unit to the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column	6,817,73	9 3,106,474	1,898,291	2,569,707	3	,108,328	17,500,539
6	(f) Public Support. Subtract line 5 from line 4							17,500,539
Se	ection B. Total Support				I			
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	11	(f) Total
7	A mounts from line 4	6,817,739	3,106,474	1,898,291	2,569,707	3,	108,328	17,500,539
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	602,619	1,221,296	575,844	790,882	1,	.172,236	4,362,877
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets		547,373	646,485	778,990		588,536	2,561,384
11	Total support (Add lines 7 through 10)					1 1		24,424,800
12	Gross receipts from related activiti					12		
13	First Five Years If the Form 990 is check this box and stop here			, thırd, fourth, or f	ifth tax year as a !	501(c)(3) organız	zation, ▶┌ —————
<u> </u>	ection C. Computation of Pul Public Support Percentage for 201			11 column (f))		14		71 650 0/-
15	Public Support Percentage for 201	-		Co.u (1))		 		71 650 % 83 330 %
	33 1/3% support test—2011. If the	•	•	contine 13 and t	line 14 is 33 1/30%	15 or more	check t	
b	and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization part IV how the organization medorganization	alifies as a public organization did n qualifies as a p — 2011. If the org tion meets the "f	ly supported orga not check the bo ublicly supported anization did not o acts and circums	nization x on line 13 or 16 organization check a box on lir tances" test, chec	ea, and line 15 is 3 ne 13, 16a, or 16b ck this box and st	33 1/3% o and line op here.	or more, 14 Explain	check this
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organization Explain in Part IV how the organization Private Foundation If the organizationstructions	nization meets th tion meets the "f	e "facts and circu acts and circums	mstances" test, o tances" test The	check this box and organization qual	d stop he ıfıes as a	e re. n publicly	▶⊏

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493134056193

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public Inspection

	FACTORIO	onni ssoi r see separate instructionsi				
	me of the organization E JEWISH COMMUNITY FOUNDATION		Employer identification number			
			94-6098382			
Pa	organizations Maintaining Donor A organization answered "Yes" to Form 9		nds or Accounts. Complete if the			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year	114				
2	Aggregate contributions to (during year)	2,305,238				
3	Aggregate grants from (during year)	2,072,869				
4	Aggregate value at end of year	13,833,129				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes N					
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit	nefit of the donor or donor advisor, or for an	y other purpose			
	rt II Conservation Easements. Complete		Form 990, Part IV, line 7.			
2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	tion or pleasure) Preservation of an I	historically importantly land area ertified historic structure of a conservation			
	casement on the last aay of the tax year	Γ	Held at the End of the Year			
а	Total number of conservation easements		2a			
ь	Total acreage restricted by conservation easement	s	2b			
c	Number of conservation easements on a certified hi	storic structure included in (a)	2c			
d						
3	Number of conservation easements modified, transf	؎ ferred. released. extinguished. or terminated	by the organization during			
	the taxable year 🛌	,	,			
4	Number of states where property subject to conserv	vation easement is located ►	<u>_</u>			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		ling of violations, and Yes No			
6	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easeme	ents during the year ▶			
7	Amount of expenses incurred in monitoring, inspect \$ \begin{align*}	ing, and enforcing conservation easements	during the year			
8	Does each conservation easement reported on line $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2(d) above satisfy the requirements of sect	Yes No			
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial :				
Par	t III Organizations Maintaining Collecti Complete if the organization answered	ons of Art, Historical Treasures, o	r Other Similar Assets.			
1a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets hel provide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or researc	h ın furtherance of public service,			
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in				
	(i) Revenues included in Form 990, Part VIII, line	1	▶ \$			
	(ii) Assets included in Form 990, Part X		► \$			
2	If the organization received or held works of art, his following amounts required to be reported under SFA		financial gain, provide the			
а	Revenues included in Form 990, Part VIII, line 1		► \$			

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	cal Tr	easur	es, or Ot	<u>her</u>	Similar A	\sset	IS (coi	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	ne foll	_		-		e of its colle	ction		
а	Public exhibition		d	Γ	Loan	orexcha	ange progra	ıms				
b	Scholarly research		e	Γ	Other	r						
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	v the	/ furthe	er the or	ganızatıon':	sexe	empt purpos	e ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than the								lar	ΓY	íes	┌ No
Par		ements. Comple	ete ıf	the	organ	ızatıon			es" to Form	990,	,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	dıary	for c	ontrıbı	itions or	other asse	ets n	ot	ΓY	ſes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	able							
										Amour	nt	
С	Beginning balance						<u> </u> :	1c				
d	Additions during the year						<u>_</u> :	Ld				
e	Distributions during the year						L	Le				
f	Ending balance						:	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?							Y	/es	┌ No
ь	If "Yes," explain the arrangement in Part XI\	/										
	t V Endowment Funds. Complete		n ans	were	ed "Ye	s" to Fo	orm 990,	Part	IV, line 10			
	· · · · · · · · · · · · · · · · · · ·	(a)Current Year	(b)	Prior \	⁄ear	(c) Two	Years Back	(d) ⊤	hree Years Bac	k (e)	Four Ye	ars Back
1a	Beginning of year balance											
b	Contributions											
C	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
	and programs									+		
f	Administrative expenses									+		
g	End of year balance											
2	Provide the estimated percentage of the year	r end balance held a	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
C	Term endowment ▶											
3a	Are there endowment funds not in the posse	ssion of the organiza	ation :	that a	re hel	d and ad	mınıstered	for t	he	г		
	organization by (i) unrelated organizations								Гэ	-/i)	Yes	No
	•		٠.	•				•	_	Ba(i) a(ii)	\rightarrow	
b	(ii) related organizations If "Yes" to 3a(ii), are the related organization				ule R?			• •	[3b	-+	
4	Describe in Part XIV the intended uses of th	•						•				
Par	VI Land, Buildings, and Equipme					10.						
					a) Cost		(b)Cost or o	other	(c) Accumu	lated		
	Description of property				•	estment)	basis (oth		depreciati		(d) Bo	ook value
1 a l	and											
	Buildings						<u> </u>					
	easehold improvements											
	quipment						88	,216		88,216		0
	Other							,				
	Add lines 1a-1e (Column (d) should equal Fo			l I, line	10(c).							0
	. (, ,	(-)	,	(- / - /		<u> </u>		Schedule		orm 90	
									:-cual	1: 4		, -

Pari VIII Investments—Other Securities. See	Form 990, Part X, line 1.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(5)200. Talac	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
		12
Part VIII Investments—Program Related. See	Porm 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	-	Cost or end-or-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	25.)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
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1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,640,632
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,763,517
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-122,885
4	Net unrealized gains (losses) on investments	4	-1,679,637
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	59,934
9	Total adjustments (net) Add lines 4 - 8	9	-1,619,703
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,742,588
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	3,020,929
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-1,619,703
3	Subtract line 2e from line 1	3	4,640,632
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b .		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4 c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	4,640,632
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	4,763,517
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	1	
c	Other losses		
d	Other (Describe in Part XIV) 2d		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,763,517
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	4,763,517

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE FOUNDATION RECOGNIZES THE FINANCIAL STATEMENT BENEFIT OF AN UNCERTAIN TAX POSITION ONLY AFTER CONSIDERING THE PROBABILITY THAT A TAX AUTHORITY WOULD SUSTAIN THE POSITION IN AN EXAMINATION FOR TAX POSITIONS MEETING A MORE- LIKELY-THAN-NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE BENEFIT EXPECTED TO BE REALIZED UPON SETTLEMENT WITH THE TAX AUTHORITY FOR TAX POSITIONS NOT MEETING THE THRESHOLD, NO FINANCIAL STATEMENT BENEFIT IS RECOGNIZED AS OF JUNE 30, 2012, THE FOUNDATION HAS HAD NO UNCERTAIN TAX POSITIONS THE FOUNDATION RECOGNIZES INTEREST AND PENALTIES, IF ANY, RELATED TO UNCERTAIN TAX POSITIONS AS INCOME TAX EXPENSE INCOME TAX RETURNS FOR THE YEAR PRIOR TO 2007 ARE NO LONGER SUBJECT TO EXAMINATION BY TAX AUTHORITIES THE FOUNDATION IS RELYING ON ITS TAX-EXEMPT STATUS AND ITS ADHERENCE TO ALL APPLICABLE LAWS AND REGULATIONS TO PRESERVE THAT STATUS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CASH SURRENDER VALUE OF INSURANCE POLICY 44,951 PARNTERSHIP DISTRIBUTIONS 14,983 TOTAL TO SCHEDULE D, PART XI, LINE 8 59,934
PART XII, LINE 2D - OTHER ADJUSTMENTS		PARTNERSHIP DISTRIBUTIONS 14,983 CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE 44,951

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0047

2011

DLN: 93493134056193

Open to Public Inspection

lame of the organization						Employer identification	on number
THE JEWISH COMMUNITY FOUNDA	IION					94-6098382	
Part I General Informatio	n on Grants and	l Assistance				'	
Does the organization maintain the selection criteria used to aw Describe in Part IV the organiza	vard the grants or ass ation's procedures fo	sistance [?] r monitoring the use o	f grant funds in the Unite	d States			✓ Yes ☐
Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
2 Enter total number of section 50	1)1(c)(3) and governr	<u> </u>	ed in the line 1 table .			<u> </u>	105

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 SELECTED GRANTS ARE SUBJECT TO REPORTING REQUIREMENTS ALL GRANTS ARE GIVEN WITH THE UNDERSTANDING THAT FUNDS SHOULD BE DIRECTED TO THE PURPOSE SPECIFIED IN THE GRANT TRANSMITTAL LETTER IF THERE IS CONCERN ABOUT FUNDS NOT BEING USED PROPERLY WE FOLLOW UP DIRECTLY WITH THE ORGANIZATION AND CAN REQUEST A REPORT AT THAT TIME

Software ID: Software Version:

EIN: 94-6098382

Name: THE JEWISH COMMUNITY FOUNDATION

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY FEDERATION OF THE GREATER EAST BAY	94- 1156560	501(C)(3)	730,558				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
THE JEWISH COMMUNITY FOUNDATION	94- 1156560	1 501(0)(3)	354,539				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ISRAEL EDUCATION FOUNDATION	52- 1623781	501(C)(3)	182,383				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY
TEMPLE SINAI	94- 1156845	501(C)(3)	139,770				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JEWISH FEDERATIONS OF NORTH AMERICA	13- 1624240	501(C)(3)	112,366				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
JEWISH FAMILY & CHILDREN'S SERVICES OF THE EAST BAY	94- 3250304	501(C)(3)	98,689				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAGNES MUSEUM FOUNDATION	94- 6103646	501(C)(3)	97,485				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
CONTRA COSTA JEWISH DAY SCHOOL	94- 3375313	501(C)(3)	71,746				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization	(b) EIN	(c) IRC Code section	(d) A mount of cash grant	(e) A mount of non-cash	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		ıf applıcable		assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE	13- 1623886	501(C)(3)	70,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
BETH JACOB CONGREGATION	94- 1156833	501(C)(3)	64,994				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH

•							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEHIYAH DAY SCHOOL	94- 2612636	1 5017631	62,957				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY
TAWONGA JEWISH COMMUNITY CORPORATION	94- 3227261	501(C)(3)	54,618				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEHRHAUS JUDAICA	94- 3001353	501(C)(3)	47,778				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
OAKLAND HEBREW DAY SCHOOL	94- 3141287	501(C)(3)	43,243				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLAUSEN HOUSE INC	94- 1639361	501(C)(3)	40,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
TEMPLE BETH ABRAHAM	94- 1375793	501(C)(3)	39,800				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE ISAIAH	94- 1626373	501(C)(3)	39,222				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
ORT AMERICA	13- 5562424	501(C)(3)	35,250				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY HIGH SCHOOL OF THE BAY	94- 3349377	501(C)(3)	34,500				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY
JEWISH COMMUNITY CENTER OF THE EAST BAY	71- 0995500	1 5017637	34,386				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE MAGNES COLLECTION OF JEWISH ART AND LIFE	94- 6103646	1 501(0)(3)	27,800				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO	94- 1156533	I 501(C)(3)	22,222				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION BETH EMEK	94- 2772595	501(C)(3)	21,800				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
URJ CAMP NEWMAN- SWIG	13- 1663143	501(C)(3)	21,250				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALAMEDA COUNTY COMMUNITY FOOD BANK	94- 2960297	501(C)(3)	21,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
FOUNDATION FOR BERKELEY HILLEL INC		501(C)(3)	20,611				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEAD-ROYCE SCHOOL	94- 1518656	501(C)(3)	20,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
ALLEGHENY COLLEGE	25- 0965212	501(C)(3)	20,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF THE JEWISH COMMUNITY LIBRARY	94- 2931048	I 501(C)(3)	20,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
TRUSTEES OF BOSTON UNIVERSITY	04- 2103547	I 501(C)(3)	20,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNION FOR REFORM JUDAISM	13- 1663143	501(C)(3)	18,000				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
JEWISH LEARNINGWORKS	94- 1167406	501(C)(3)	17,860				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY

	· · · · · · · · · · · · · · · · · · ·						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HABONIM LABOR ZIONIST YOUTH	13- 5596779	501(C)(3)	16,245				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
TIDES CENTERSHALOM BAYIT	94- 3213100	501(C)(3)	16,120				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLOSED-CONTRA COSTA JEWISH COMMUNITY CENTER	94- 1156560	I 501(C)(3)	16,025				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY
HAZONINC	13- 4087102	1 5017637	15,893				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HAZON	13- 4087102	501(C)(3)	15,808				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
CONGREGATION KOL SHOFAR	94- 2539545	501(C)(3)	15,563				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLUESTAR PR	77- 0623029	501(C)(3)	15,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
JEWISH COALITION FOR LITERACY	94- 1156335	501(C)(3)	15,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGE MARK CHILDREN'S HOUSE	94- 3255845	501(C)(3)	14,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
CALIFORNIA STATE UNIVERSITY CHICO	95- 1230865	501(C)(3)	12,600				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CENTER FOR VICTIMS OF TORTURE	36- 3383933	1 501/07/31	12,500				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
UNIVERSITY OF CALIFORNIA BERKELEY FOUNDATION	94- 6090626	I 501(C)(3)	12,250				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD OF THE EAST BAY	94- 3101524	501(C)(3)	12,198				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
THE COMMONWEALTH CLUB OF CALIFORNIA	94- 0399260	501(C)(3)	12,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UPSTART BAY AREA	26- 3094076	501(C)(3)	12,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
SMILE TRAIN INC	13- 3661416	501(C)(3)	10,250				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORION ACADEMY	94- 3315141	501(C)(3)	10,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
CALIFORNIA TROUT	24- 7097680	1 501(0)(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF ISRAEL DISABLED VETERANS INC - BEIT HALOCHEM	13- 3392711	501(C)(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
FD HOPE	36- 4413933	501(C)(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRLS INCORPORATED OF ALAMEDA COUNTY	94- 1558073	1 501(C)(3)	10,000		,		TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
YOUTH UPRISING	20- 3321544	501(C)(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON INSTITUTE FOR NEAR EAST POLICY	52- 1376034	501(C)(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
FRED FINCH YOUTH CENTER	94- 0474080	501(C)(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NATURE CONSERVANCY OF HAWAI'I	53- 0242652	1 5017(3)	10,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
JEWISH FAMILY & CHILDREN'S SERVICES - SAN FRANCISCO	94- 1156528	I 501(C)(3)	9,500				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY	94- 6002123	1 501(C)(3)	9,250				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
MORTON AND AMY FRIEDKIN SUPPORTING FOUNDATION	80- 0076298	I 501(C)(3)	8,859				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE BETH TORAH	94- 6085322	501(C)(3)	8,820				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
CHABAD SYNAGOGUES INC	68- 0422655	501(C)(3)	8,188				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LARKIN STREET YOUTH SERVICES	94- 2917999	501(C)(3)	8,174		<i>-</i> ,		TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
HOME FOR JEWISH PARENTS	94- 2833147	501(C)(3)	7,795				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL RAMAH COMMISSION	13- 6161110	1 501763733	7,675				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY
KEVAH	94- 1167406	1 5017631	7,563				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN FRANCISCO STATE UNIVERSITY	94- 1170352	501(C)(3)	7,500				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
MAKE-A-WISH FOUNDATION OF THE HUDSON VALLEY	13- 3344306	1 501(C)(3)	7,500				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOTRE DAME DE NAMUR UNIVERSITY	94- 1156646	501(C)(3)	7,500				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
AMIT INC	36- 3749777	501(C)(3)	7,500				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GILDA'S CLUB WORLDWIDE	13- 3617481	501(C)(3)	7,500				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
HADASSAH THE WOMEN'S ZIONIST ORGANIZATION OF AMERICA INC	13- 1656651	501(C)(3)	7,350				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIDRASHA EAST BAY JEWISH COMMUNITY HIGH SCHOOL	94- 2933210	501(C)(3)	7,164				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY
BOYS & GIRLS CLUBS OF OAKLAND	94- 1279794	501(C)(3)	7,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF THE ISRAEL DEFENSE FORCES	13- 3156445	501(C)(3)	7,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
AMERICAN FRIENDS OF THE JAFFA INSTITUTE	11- 2697261	501(C)(3)	7,000				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD ORT	06- 1669917	501(C)(3)	7,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
KQED	94- 1241309	501(C)(3)	6,750				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF THE OLD CITY CHEDER IN JERUSALEM INC	20- 4401435	501(C)(3)	6,650				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY
JEWISH NATIONAL FUND (KEREN KAYEMETH LEISRAEL) INC	13- 1659627	501(C)(3)	6,610				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SAN FRANCISCO	94- 1156628	I 501(C)(3)	6,500				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
MAZON - A JEWISH RESPONSE TO HUNGER	22- 2624532	501(C)(3)	6,400				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REGENTS OF THE UNIVERSITY OF MICHIGAN	38- 6006309	501(C)(3)	6,250				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
OAKLAND MUSEUM OF CALIFORNIA FOUNDATION	94- 3094513	501(C)(3)	6,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRTHRIGHT ISRAEL FOUNDATION	13- 4092050	501(C)(3)	6,000				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
JEWISH FEDERATION OF THE EAST BAY	94- 1156560	I 501(C)(3)	6,000				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REDWOOD DAY SCHOOL	94- 2289521	501(C)(3)	6,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
THE CONTEMPORARY JEWISH MUSEUM	47- 0920831	501(C)(3)	5,750				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH VOCATIONAL AND CAREER COUNSELING	94- 2213100	501(C)(3)	5,634				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY
SHELTER INC OF CONTRA COSTA COUNTY	68- 0117241	501(C)(3)	5,600				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEACH FOR AMERICA	13- 3541913	501(C)(3)	5,500				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE
AMERICAN JEWISH COMMITTEE	13- 5563393	501(C)(3)	5,500				TO PROVIDE GENERAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOCTORS WITHOUT BORDERS USA	13- 3433452	501(C)(3)	5,250				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
AMERICAN RED MAGEN DAVID FOR ISRAEL	36- 2443175	501(C)(3)	5,250				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTCOAST CHILDREN'S CLINIC	94- 2553319	1 501(0)(3)	5,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
THE UNITED STATES HOLOCAUST MEMORIAL MUSEUM	52- 1309391	I 501(C)(3)	5,000				TO PROVIDE CULTURAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FSH SOCIETY INC	52- 1762747	501(C)(3)	5,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
STANDWITHUS	01- 0566033	501(C)(3)	5,000				TO PROVIDE EDUCATIONAL SERVICES TO THE JEWISH COMMUNITY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOHN MUIR HEALTH FOUNDATION	94- 2650855	501(C)(3)	5,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE
CONGREGATION B'NAI SHALOM	51- 0155227	501(C)(3)	5,000				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION BETH ISRAEL	94- 1566830	501(C)(3)	5,000				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
FRACTURED ATLAS PRODUCTIONS INC	11- 3451703	501(C)(3)	5,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEBREW INSTITUTE OF WHITE PLAINS	13- 1740264	501(C)(3)	5,000				TO PROVIDE SPIRITUAL SERVICES TO THE JEWISH COMMUNITY
UC SAN DIEGO FOUNDATION	95- 2872494	501(C)(3)	5,000				TO PROVIDE EDUCATIONAL SERVICES TO THE COMMUNITY AT LARGE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHILHARMONIA BAROQUE ORCHESTRA	94- 2848318	501(C)(3)	5,000				TO PROVIDE GENERAL SERVICES TO THE COMMUNITY AT LARGE

DLN: 93493134056193

OMB No 1545-0047

Schedule J

Department of the Treasury

Internal Revenue Service

(Form 990)

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

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ΤНΕ	JEV	VISH	CO	MML	JNITY	FOU	NDAT	ION

Employer identification number

94-6098382

Pa	Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to in officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all the contraction of the c	nat apply	,			
	Compensation committee	<u> -</u>	Written employment contract			
	Independent compensation consultant	<u> </u>				
	Form 990 of other organizations	ı	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line 1a with respect to the filing organization $% \left(1\right) =\left(1\right) \left(1\right$			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in Part III	n Kegs s	section 53 4958-4(a)(3)/ If "Yes," describe			NI -
_			alda aaraa aaraa daara d	8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name			W-2 and/or 1099-MI	SC compensation (iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior
		(i) Base compensation	incentive compensation	reportable compensation	compensation		, ,,, ,	Form 990 or Form 990-EZ
(1) LISA TABAK	(I) (II)	150,000 0	0 0	0	0	10,726 0	160,726 0	0
(2) JAMES BRANDT	(I) (II)	0 181,000	0	· ·	0		0 181,000	0

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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DLN: 93493134056193

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

2011

OMB No 1545-0047

Open to Public Inspection

Name of	f the organization SH COMMUNITY FOUNDATION							Eı	mployer ic	lent if ica	tion numbe	er
									4-60983			
Part I	Excess Benefit Trar Complete of the organizat										ne 40b	
	oomproto ii tiio organizat					are 117 mile 20 a c	,, <u></u>	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>		(c)
1	(a) Name of disqu	ualıfıed	person			(b) Desc	ription	of trans	action			ected?
											Yes	No
2 Fnt	er the amount of tax impose	ed on th	ne organ	nization man	agers or	disqualified perso	ons dur	ına the v	ear under	-		
	tion 4958							_	_	\$		
3 Ent	er the amount of tax, if any,	, on line	2, abo	ve, reimburs	ed by th	e organization .			🕨	\$		
Part II	Loans to and/or F Complete if the organiz) Part IV June 26	or For	m 000-E	7 Dart \/	lino 29		
	Complete if the organiz			1 165 0111	OIIII 990	, Farciv, line 20	, 01 1 011	III 990-L	(f)	, lille 30	<u> </u>	
(a) Nam	a of interested never an and		oan to m the	(4)0 ==	unal		(e)		Approv		(g)Writt	en
(a) Nam	e of interested person and purpose		zation?	(c)Orig principal a		(d)Balance due	default?		by board or committee?		agreement?	
	•	To	From	' '			Yes	No	Yes	No No	Yes	No
		10	FIOIII				165	110	165	110	165	140
								1		<u> </u>		
Γotal .	<u> </u>				► \$							
Part II	Grants or Assistan Complete if the orga			_			' line :	27				
						een interested per						
	a) Name of interested pers	on	`	an	d the or	ganızatıon		(c) A m	ount of gr	ant or ty	pe of assis	tance
			\perp									
			-				+					

Part IV Business Transactions Involving Interested Perso
--

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

Complete ii the organizatio	il alisweled les oil	TOTTI 330, Part IV, III	16 Z0a, Z0b, 01 Z0c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organız	aring of ation's lues?
	organization			Yes	No
(1) GERALD FRIEDKIN AND MORTON FRIEDKIN	BOARD MEMBERS		THE FRIEDKINS ARE 50/50 OWNERS IN GMF REALTY, A SUBCHAPTER S CORPORATION GMF OWNS THE BUILDING IN WHICH THE JEWISH COMMUNITY FEDERATION OF THE GREATER EAST BAY OPERATES JFED PAYS RENT TO GMF THE JEWISH COMMUNITY FOUNDATION REIMBURSES JFED FOR USE OF THE BUILDING		No

Part V Supplemental Information

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

Identifier Ret	urn Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493134056193

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Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

NonCash Contributions

Name of the organization THE JEWISH COMMUNITY FOUNDATION

Employer identification number

94-6098382

Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(d Method of d contribution	etermı		
1	Art—Works of art			3				
	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	17	653,872	NYSE AVG PRICE			
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
	Real estate—O ther							
18	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	Other ► ()							
	O ther ► () O ther ► ()							
	Number of Forms 8283 received	L by the ora	anization during the tax ve	ar for contributions				
	for which the organization compl				29			
							Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the	date of the initial contributi	on, and which is not required	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	ft acceptan	ce policy that requires the	review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell r	non-cash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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DLN: 93493134056193

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011
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Inspection

Name of the organization
THE JEWISH COMMUNITY FOUNDATION

Employer identification number
94-6098382

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	MATHILDE ALBERS IS THE MOTHER OF DENNIS ALBERS AMY AND MORTON FRIEDKIN ARE HUSBAND AND WIFE. EILEEN AND ROBERT RUBY ARE HUSBAND AND WIFE. TERRY FRIEDKIN, BOARD PRESIDENT - JEWISH COMMUNITY FEDERATION OF THE GREATER EAST BAY, SISTER-IN-LAW TO MORTON FRIEDKIN, AMY FRIEDKIN AND GERALD FRIEDKIN
	FORM 990, PART VI, SECTION B, LINE 11	A MEMBER OF THE AUDIT COMMITTE REVIEWS THE FORM 990 BEFORE FINALIZATION
	FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS REVIEWED AT THE FIRST BOARD MEETING OF THE YEAR
	FORM 990, PART VI, SECTION B, LINE 15A	WHILE THERE IS NOT A COMPENSATION COMMITTEE, THE DIRECTOR OF OPERATIONS CONSULTS WITH THE JEWISH FEDERATIONS OF NORTH AMERICA TO DETERMINE A SALARY RANGE FOR AN OPEN POSITION IN A FOUNDATION OR FEDERATION OF OUR SIZE. THE SALARY IS THEN DETERMINED AFTER CONSULTATION WITH THE CEO, THE PRESIDENT OF FEDERATION, AND THE PRESIDENT OF THE FOUNDATION
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -1,679,637 CASH SURRENDER VALUE OF INSURANCE POLICY 44,951 PARNTERSHIP DISTRIBUTIONS 14,983 TOTAL TO FORM 990, PART XI, LINE 5 -1,619,703
	FORM 990, PART V, LINE 2A	FORM 990, PART VII FORM 990, PART IX, LINE 5 & 7 THE JEWISH FEDERATION OF THE GREATER EAST BAY PAYS ALL OF THE JEWISH COMMUNITY FOUNDATION'S SALARY EXPENSE THROUGH ITS PAYROLL COMPANY AND THEN BILLS THE FOUNDATION FOR REIMBURSEMENT

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Related Organizations and Unrelated Partnerships

► See separate instructions.

OMB No 1545-0047

DLN: 93493134056193

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Department of the Treasury Internal Revenue Service

(Form 990)

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

Attach to Form 990.

Inspection

	e organization OMMUNITY FOUNDATION				Employer ide	entification number		
					94-6098382	2		
Part I	Identification of Disregarded Entities (Comple	ete if the organization	on answered "Yes'	' on Form 990, P	art IV, line 33.)			
	(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-Exempt Organiz or more related tax-exempt organizations during the		ıf the organizatior	answered "Yes"	on Form 990, Pa	rt IV, line 34 becau	ise it had	one
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	(g) 512(b)(1 trolled nization
							Yes	No
See Additional	Data Table							
								_
For Privacy	Act and Panerwork Reduction Act Notice, see the Instructio	ns for Form 990	Cat No 50	1135V		Schedule R (Form 990) 2011

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	, ·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No	
												i

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

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

(4)

(5)

(6)

Par	rt V Transactions With Related Organizations (Complete if the organization answ	wered "Ye	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV						Yes	No
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated orga	nızatıons lısted ın Part	s II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity					1a		No
b	Gift, grant, or capital contribution to related organization(s)					1b		No
C	Gift, grant, or capital contribution from related organization(s)					1c		No
d	Loans or loan guarantees to or for related organization(s)					1d		No
e	Loans or loan guarantees by related organization(s)					1e		No
f :	Sale of assets to related organization(s)					1f		No
g	Purchase of assets from related organization(s)					1 g		No
h	Exchange of assets with related organization(s)					1h		No
i L	Lease of facilities, equipment, or other assets to related organization(s)					1 i		No
j l	Lease of facilities, equipment, or other assets from related organization(s)					1j	Yes	
k	Performance of services or membership or fundraising solicitations for related organization(s)					1k		No
I F	Performance of services or membership or fundraising solicitations by related organization(s)					11		No
m :	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					1m	Yes	
n	Sharing of paid employees with related organization(s)					1n		No
o	Reimbursement paid to related organization(s) for expenses					10	Yes	
p	Reimbursement paid by related organization(s) for expenses					1р		No
q	O ther transfer of cash or property to related organization(s)					1q		No
r (Other transfer of cash or property from related organization(s)					1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line,	including covered relat	ionships and transact	ıon thresholds			
	(a) Name of other organization		(b) Transaction type(a-r)	(c) Amount involved	Method of dete	d) emin olved	ing amo	unt
(1) JEW	EWISH COMMUNITY FEDERATION OF THE GREATER EAST BAY		0	770,711	COST			
(2) SUF	UPPORTING FOUNDATIONS		Р	588,523	COST			
(3)								

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(f) Share of Disproprtional assets		(h) Disproprtionate allocations?		Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 94-6098382

Name: THE JEWISH COMMUNITY FOUNDATION

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - 1	Tuentineation of Rei	ateu lax-Ex	tempt Orga	IIIZauoiis		
(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	g Section 512 (b)(13) controlled organization
JEWISH COMMUNITY FEDERATION						
OF THE GREATER EAST BAY 300 GRAND AVENUE OAKLAND, CA 94610	FUNDRAISING TO SUPPORT JEWISH ORGANIZATIONS	CA	501(C) (3)	LINE 7		No
94-1156560						
CHOO FAMILY SUPPORTING FOUNDATION	FUNDRAISING TO	CA	501(C)	LINE 11A T		N.o.
300 GRAND AVENUE OAKLAND, CA 94610 20-3987343	SUPPORT JEWISH ORGANIZATIONS	CA	(3)	LINE 11A, I		No
JOSEPH AND SHERRY FELSON						
FAMILY SUPPORTING FOUNDATION 300 GRAND AVENUE	FUNDRAISING TO SUPPORT JEWISH ORGANIZATIONS	CA	501(C) (3)	LINE 11A, I		No
OAKLAND, CA 94610	O NGANIZATIONS					
56-2620699 L & A KESSLER FAMILY FOUNDATION			 	+		
300 GRAND AVENUE OAKLAND, CA 94610 76-0784729	FUNDRAISING TO SUPPORT JEWISH ORGANIZATIONS	CA	501(C) (3)	LINE 11A, I		No
LIBITZKY FAMILY FOUNDATION						
300 GRAND AVENUE OAKLAND, CA 94610 94-3372543	FUNDRAISING TO SUPPORT JEWISH ORGANIZATIONS	СА	501(C) (3)	LINE 11A, I		No
THE DONALD & CAROL CHAIKEN						
FOUNDATION 300 GRAND AVENUE	FUNDRAISING TO SUPPORT JEWISH	CA	501(C) (3)	LINE 11A, I		No
OAKLAND, CA 94610	ORGANIZATIONS					
31-1585703 THE GERALD S & MIRIAM M FRIEDKIN FOUNDATION	FUNDRAISING TO					
300 GRAND AVENUE OAKLAND, CA 94610 03-0527948	SUPPORT JEWISH ORGANIZATIONS	CA	501(C) (3)	LINE 11A, I		No
THE MORTON L & AMY R FRIEDKIN						
FOUNDATION	FUNDRAISING TO		501(C)			
300 GRAND AVENUE OAKLAND, CA 94610 80-0076298	SUPPORT JEWISH ORGANIZATIONS	CA	(3)	LINE 11A, I		No
THE SJ COLEN FAMILY FOUNDATION						
300 CRAND AVENUE	FUNDRAISING TO	C A	501(C)	I INE 11A T		
300 GRAND AVENUE OAKLAND, CA 94610 91-2172750	SUPPORT JEWISH ORGANIZATIONS	CA	(3)	LINE 11A, I		No
IRVING AND VARDA RABIN FOUNDATION	FUNDRAISING TO					
300 GRAND AVENUE OAKLAND, CA 94610 94-3345608	SUPPORT JEWISH ORGANIZATIONS	CA	501(C) (3)	LINE 11A, I		No
THE MAGNES MUSEUM						
FOUNDATION	FUNDRAISING TO		F01/C)			
300 GRAND AVENUE OAKLAND, CA 94610 94-6103646	SUPPORT JEWISH ORGANIZATIONS	CA	501(C) (3)	LINE 11A, I		No
11. 0100010	1	ı	ı	1 1		ı