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## Form **990**

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)

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

OMB No 1545-0047 2011

Open to Public Inspection

A	ror the	2011 calendar year, or tax year beginning SEP 1, 2011 and	enaing A	UG 31, ZU12	
В	Check if applicable			D Employer identifi	
	Addres change	JEWISH FEDERATION OF SIOUX CITY			
	Name change	Doing Business As		42-0	698205
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	Termin- ated			4	258-0618
	Amend			G Gross receipts \$	766,916.
	Applica			H(a) Is this a group re	
	pendini	F Name and address of principal officer:MARILYN COHEN		for affiliates?	Yes X No
			104	H(b) Are all affiliates inc	
$\overline{}$	Tax-exe	mpt status. X 501(c)(3)		1 ' '	list. (see instructions)
		e: ► N/A		H(c) Group exemptio	, ,
		organization: X Corporation Trust Association Other	L Year	<del></del>	A State of legal domicile: IA
		Summary	12		
_	<del>1 '</del>		ROMOTE	SOCIAL WEL	FARE IN THE
Activities & Governance	1	SIOUXLAND AREA.		<u> </u>	
ı.		Check this box   If the organization discontinued its operations or dispose	sed of more	than 25% of its net as	ssets
š		lumber of voting members of the governing body (Part VI, line 1a)		3	9
Ğ	1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	8
ళ		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
iţi		otal number of volunteers (estimate if necessary)	•	6	0
≨	1	otal unrelated business revenue from Part VIII, column (C), line 12	•	. 7a	0.
Ă	i	let unrelated business taxable income from Form 990-T, line 34		. <u>/a</u> /b	0.
	<u> </u>	ver differenced business taxable income from Form 950-1, line 54		Prior Year	Current Year
		Contributions and grants (Part VIII. line 1b)		120,137.	125,995.
_e_	ł	Contributions and grants (Part VIII, line 1h)	<u> </u>	12,172.	12,845.
Revenue	1	Program service revenue (Part VIII, line 2g)	-	72,364.	59,422.
₹ <b>0</b>	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	72,304· 0.	39,422.
0	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<del> </del>	204,673.	198,262.
<u> </u>	T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		204,673.	198,202.
Expenses JAIN		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	0.	0.
3	1	denefits paid to or for members (Part IX, column (A), line 4)	-	75,855.	77,413.
Se'	1	dalaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-		77,413.
<b>.</b> E	1	rofessional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	
Ä		otal fundraising expenses (Part IX, column (D), I <del>ne 25)</del>	<del>- •</del>	00 070	81,271.
5	i .	other expenses (Part IX, column (A), lines 11a-11d, 11f-24e		80,970. 156,825.	
) ) )	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	) 		158,684.
<u> </u>	19 H			47,848.	39,578.
Net Assets or- Fund Balances		12	Be	ginning of Current Year	End of Year
Sage	20 T			1,536,311.	1,651,273.
E E	21 T	otal liabilities (Part X, line 26)	_	4,168.	706.
	rt II	et assets or fund balances Subtract line 21 from time 20 Signature Block		1,532,143.	1,650,567.
_		. <del>- Y</del>		-4 4- 4- 4- 4- 4- 4- 4- 4- 4- 4- 4-	ulunaviladas and balas dua
		es of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of wh	iich preparer	nas any knowledge.	<u> </u>
		Signature of officer	<del> </del>	11/89/30 Date	0/2
Sigr	- 1	•		Date	
Her	e	MARILYN COHEN, EXECUTIVE DIRECTOR			
		Type or print name and title	10		DTIN -
		Print/Type preparer's name Preparer's synatore		ate Check	PTIN
Paid	-	AWRENCE L DELPERDANG	<u>/'</u>	0 30 12 self-employ	
Prep	<u> </u>	irm's name DELPERDANG, SCHUH & CO./P/CV		Firm's EIN	42-1412604
Jse	Only F	Firm's address P.O. BOX 627			
		SIOUX CITY, IA 51102-18627		Phone no. 7	12-255-8081
Mav	the IRS	6 discuss this return with the preparer shown above? (see instructions)			X Yes No

	n 990 (2011) JEWISH FEDERATION OF STOUX CITY 42-0698205 Page 2  art III   Statement of Program Service Accomplishments
ГС	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE JEWISH FEDERATION OF SIOUX CITY IS TO PROMOTE
	SOCIAL WELFARE IN THE SIOUXLAND AREA.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?  Yes X No
	·
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported
4a	, (and an
	THE ORGANIZATION PROVIDES JEWISH EDUCATION TO THE JEWISH POPULATION OF
	THE GREATER SIOUX CITY AREA AND SURROUNDING COMMUNITIES.
4b	(Code ) (Expenses \$ 727. including grants of \$) (Revenue \$)
70	
	THE ORGANIZATION COORDINATES AND PROVIDES COMMUNITY RELATIONS THROUGH
	VARIOUS CULTURAL AND OTHER EVENTS.
	· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O)
-	
4 -	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 22,786.
	Form <b>990</b> (2011)

			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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			.,
_	public office? If "Yes," complete Schedule C, Part I	_3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		177
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		^
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,			72
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	<u> X</u>	
þ	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	Х	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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	11c		X
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	i		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			·-
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		21
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 c	2011)

42-0698205 JEWISH FEDERATION OF SIOUX CITY Page 4 Form 990 (2011) Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the X United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, Х column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K If "No", go to line 25 24a 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 24¢ any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 25a X disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disgualified 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 Х 25b Schedule L. Part I 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 Х 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X 27 of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28b b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, Х 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N. Part II. 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 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 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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X

X

36

37

38

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

Statements Regarding Other IRS Filings and Tax Compliance   Check if Sheduko & Contains a response to any question in the Part V	Form	1990 (2011) JEWISH FEDERATION OF SIOUX CITY 42-0698	205	Pa	age <b>5</b>
Test the number reported in Box 3 of Form 1086 Enter 0-f not applicable	Pa				
1s Enter the number of pome Val Can Cuted on In a la Enter O - In or applicable 6. Det the organization comply with backing withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to prize winners? 2s Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, fled for the calendar year ending with or within the year covered by this return bit at least one is reported on Interest 2, did the organization fled are injuried sederal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unriabed business gross income of \$1,000 or more dumpt the year?  So If Yes, *Thas it field a Form 990-T for the year? If *No. *provide an explanation in Schedule O  If Yes, *Thas it field a Form 990-T for the year? If *No. *provide an explanation in Schedule O  A At any time the name of the foregin country (such as a bank account, account, or other financial Accounts  So Was the organization and the foregin country (such as a bank account, account, or other financial Accounts  So Was the organization for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  So Was the organization and the organization that it was or a party to a prohibeted tax shellor transaction?  So Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles?  If *Yes,** I did the organization to tax deductibles?  Organizations that may receive deductible contributions under section 170(c).  If *Yes,** I did the organization to tax deductibles?  Organizations that may receive deductible contributions under section 170(c).  If *Yes,** I did the organization in the was ore of the report of the region of tax prohibits and party to goods and services provided?  Organizations that may receive deductible contribution of quite prohibits and party to a personal benefit contract?		Check if Schedule O contains a response to any question in this Part V			ᆜ
b Enter the number of Forms W-20 included in line 1a. Enter 0 -finot applicable   10   10   10   10   10   10   10   1			$\longrightarrow$	Yes	No
Det the organization comply with backup withholding roles for reportable payments to vendors and reportable gaming (gambling) writings to prize winners?  2. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the catendar year ending with or within the year covered by this return.  5. If all least one is reported on line 23, did the organization file all required federal employment tax returns?  6. Note, if the sum of lines 1a and 2 as greater than 250, you may be required to e-file (see natriotions).  8. Did the organization have unitiated business gross incrine of \$1,000 or more dumpt the year?  8. Did the organization have unitiated business gross incrine of \$1,000 or more dumpt the year?  8. Did TYes, *Inat it filed a Form 990 To for the year? if *INo*, provide an explanation in Schedule O  8. Did and transmitted business gross incrine of \$1,000 or more dumpt the year?  9. Did *IYes, *Inat the remained of the foreign country (such as a bank account, securities account, or other financial account)?  9. Did *IYes, *Inat the manner of the foreign country (such as a bank account, securities account, or other financial account)?  9. Did any taxabib party northy the organization have it was or as a party to a prohibetion tax shelter transaction?  9. Did any taxabib party northy the organization have it was or as a party to a prohibetion tax shelter transaction?  9. Did we organization and the organization file form 8868172  9. Did we organization that were not tax deductible?  9. If Yes, *Ind the organization manual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions under section 170(c).  9. Did the organization that may receive deductible contributions under section 170(c).  9. Did the organization that may receive deductible contributions under section 170(c).  9. Did the organization selection selection that the property of the property of which it was required to	1a	, , , , , , , , , , , , , , , , , , , ,			
gambing) winnings to prize winners?  2a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return  5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  6 Note. If the sum of lines 1 and 2 are greater than 250, you may be required federal employment tax returns?  7 Note. If the sum of lines 1 and 2 are greater than 250, you may be required for e-file (see instructions)  8 Did the organization have unrelated business gross income of \$1,000 or more during the year?  8 Did the organization have unrelated business gross income of \$1,000 or more during the year?  9 At 2a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; 1 for year out out the year of the security of the security of the securities account, or other financial Accounts  8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  9 Did any tixable party nority the organization file form 8888-17  10 West, 1 of the organization and the organization file form 8888-17  11 Yes, 1 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  11 Yes, 1 did the organization receive a payment in excess of \$15 made party set contribution and party for goods and services provided?  12 Did the organization receive a payment in excess of \$15 made party set contribution and party for goods and services provided to the payor?  15 Did the organization receive a payment in excess of \$15 made party set contribution and party for goods and services provided to the payor?  15 Did the organization receive a payment in excess of \$15 made party set contribution and party for goods and services provided to the payor?  16 Did the organization receive a payment in excess of \$15 made party set contributio	b	Enter the humber of Forms with the 12 Enter of thot applicable			
the factor the number of employees reported on Form W3, Transmittal of Wage and Tax Statements.  Ited for the cachindar year and ending with or within the year covered by this return  Ited for the cachindar year and mile all required federal employment tax returns?  Note. If the sum of lines 1 a and 2 a is greater than 250, you may be required to e-fife (see instructions)  30 bit the organization have unrelated obusiness gross income of \$1,000 or more during the year?  \$2 b  If "Yes," has if field a Form 990 T for this year? If "No," provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," has if field a Form 990 T for this year? If "No," provide an explanation in Schedule O  If "Yes," to line 5a or 5b, did the organization the form 10 F90 22 1, Report of Foreign Bank and Financial Accounts  Sa Was the organization five to prohibited that sheller transaction?  If "Yes," to line 5a or 5b, did the organization file Form 8886-17?  Boes the organization reason and accounts are such as the explanation of the secondary of the secondary of the organization micules with every selectation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  If "Yes," indicate the number of Form 8886 filed during the year  If "Yes," indicate the number of Form 8886 filed during the year  If "Yes," indicate the number of Form 8886 filed during the year  If the organization during the year pay premiums, directly or indirectly, on a personal benefit contract?  If the organization meewed an contribution of cushed filed personal property for which it was required to the Form 8889 as required?  If the organization during the year pay premiums, directly or indirectly, on a personal benefit contract?  If the organizat	С				
bit of a teach or the calendar year ending with or within the year covered by this return  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross ancome of \$1,000 or more during the year?  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 other financial account) or the foreign country (such as a bank account, or other financial account)?  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. ►  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5c Uses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  6c Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  7b If Yes, the did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  8c Did the organization return algorithm and the property of the property of the programization received any particular than the property of the programization received any particular than the property of the programization received any particular than the programization received any orthogological port of the region organization received an contribution of cars, boats, anylanes, or other vehicles, did the organization in the Form 889 as required?  1b If the organization received an contribution of cars, boats, anylanes, or othe		· · · · · · · · · · · · · · · · · · ·	1c		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unnetlated business gross income of \$1,000 or more during the year?  3b If "Yes," has if filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  3a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a X  5b If "Yes," that the name of the foreign country   Such as a bank account, securities account, or other financial accounts  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c If Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c If Yes," did the organization receive a payment in excess of 375 made party as a contribution of payment or the such as a contribution of the very line or the payment or the paymen	2a		.		
Note. If the sum of lines 1a and 2a is greater than 280, you may be required to e-file (see instructions) 3			1 1		
3a D the organization have unrelated business gross income of \$1,000 or more during the year?  b if "Yes," has if field a Form 990-T for this year? if "No," provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account, in a foreign country (such as a bank account, securities account, or other financial account)?  b if "Yes," that the name of the foreign country ≥  See instructions for filing requirements for Form TD F 90-21. Report of Foreign Bank and Financial Accounts  5a Was the organization requirements for Form TD F 90-21. Report of Foreign Bank and Financial Accounts  5b Was the organization filing requirements for Form TD F 90-21. Report of Foreign Bank and Financial Accounts  5c Was the organization file form 8886-T?  6 If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6 If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  7 Organization shat was renot tax deductible?  9 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 If "Yes," did the organization notify the donor of the value of the goods or services provided?  9 If the organization shar may receive deductible contributions under section 170(c).  10 If the organization organization only the donor of the value of the goods or services provided?  10 If "Yes," did the organization on bothy the donor of the value of the goods or services provided?  11 If yes, the organization receive a paryling the year and property for which it was required to file Form 8882?  12 If "Yes," indicate the number of Forms 8282 filed during the year a paryling organization organization organization shall the year and	þ		2b		<del></del>
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JEWISH FEDERATION OF SIOUX CITY

42-0698205 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 8 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 3 of officers, directors, or trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b Х persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: R X 8a a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 14 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? X 15a a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization 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 X 16a taxable entity during the year? 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 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed -NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection, indicate how you made these available. Check all that apply Own website → Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial 19 statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. 20 JEWISH FEDERATION OF SIOUX CITY - 712-255-8081

IA, SIOUX CITY, IA

51104

38TH ST

SIOUX CITY

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### JEWISH FEDERATION OF SIOUX CITY

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee "
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization n	or any related	d organization compensate						ated any current officer, director, or trustee					
(A)	(B)							(D)	(F)				
Name and Title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of			
	week		ceran	lo a d	recto	yr/trus	lee)	from	from related	other			
	(describe	rect						the	organizations (W-2/1099-MISC)	compensation from the			
	hours for related	9 9	點	١		sated		organization (W-2/1099-MISC)	(VV-2/1099-IVII3C)	organization			
	organizations	ruste	ı) trus		8	шреп		(***-27 1033-141100)		and related			
	in Schedule	Individual trustee or director	uton	<u>.</u>	윭	stco	<b>a</b> 5			organizations			
	O)	P P	Institutional trustee	Officer	Keye	Highest compensated employee	Form						
(1) MARILYN COHEN													
EXECUTIVE DIRECTOR	40.00	X			_			40,434.	0.	0.			
(2) LISA LEOPOLD													
VICE PRESIDENT - EVENTS	0.50	X		Х	ļ	ļ		0.	0.	0.			
(3) JAY GELFAND								_					
SECRETARY	1.00	X		X				0.	0.	0.			
(4) MIKE POTASH					Ì					_			
VICE PRESIDENT - FINANCE	0.50	X		X		-		0.	0.	0.			
(5) LINDA KALIN										_			
VICE PRESIDENT - EDUCATION	0.50	X		X				0.	0.	0.			
(6) DOLF IVENER										_			
VICE PRESIDENT - OPERATIONS	0.50	X		X				0.	0.	0.			
(7) SARILYE ATLAS		!								_			
DIRECTOR	0.50	X						0.	_0.	0.			
(8) FRANK BARON													
CHAIRMAN	0.50	X		X		-		0.	0.	0.			
(9) BETHANY MANNING													
PRESIDENT	1.00	X		X				0.	0.	0.			
						$\vdash$							
						-							
					İ								
									1				
						Щ							
		L					L	L	<u></u>				

	rt VII Section A. Officers, Directors, Tru (A)	(B) (C)							(D)	(E)	(F)			
	Name and title	Average	(do		Pos heck		) than	one	Reportable Reportable			Estimated		
		hours per week					ıs bot or/trus		compensation	compensation from related	1		nount other	
		(describe	흉						the	organizations			pensa	
		hours for	a die				ated		organization	(W-2/1099-MIS	C)		om th	
		related organizations	ustee	truste		١	Suadı		(W-2/1099-MISC)			_	anıza d rela	
		in Schedule	Individual trustee or director	Institutional trustee	_	Key emptoyee	st con	 		1			ınızat	
		O)	Mpul	Instit	Officer	Key er	Highest compensated employee	Form						
										-				
											_		_	
			Ì											
					-		-							
											İ			
						<u> </u>	Γ						,	,
			_											
						-	-							
	C. b. Asset	<u> </u>	<u> </u>			l			40,434.		0.			0.
	Sub-total  Total from continuation sheets to Part VI	I Section A							0.		0.		-	0.
	Total (add lines 1b and 1c)	i, Section A							40,434.		0.			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	no re		,000 of reportable				
	compensation from the organization	<del></del>										····		0
											Г		Yes	No
3	Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s		ıstee	e, ke	y en	nplo	yee,	or I	highest compensated e	mployee on				x
4	For any individual listed on line 1a, is the su		e cc	mne	anea	ition	anc	l oth	ner compensation from	the organization	ŀ	3	-	
•	and related organizations greater than \$150									ine organization		4		х
5	Did any person listed on line 1a receive or a									dual for services	Ī			
	rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	ich j	oers	on					5		X
	tion B. Independent Contractors									0.00.000		<del></del>		
1	Complete this table for your five highest co the organization. Report compensation for										ensa	ation f	rom	
	(A)	ine calendar ye	ear e	Hull	ig w	/11/1	OI WI	T	(B)	yeai		(C	3	
	Name and business	address	NC	NE	3				Description of s	ervices	C	omper		n
		<del> </del>		<del>-</del> -										
			_					_						
	<del></del>							$\dashv$		-				
	<del> </del>	<del>.</del>						$\dashv$						-
		·						T				-		
									<del></del>					
2	Total number of independent contractors (in	_	ot lır	nited	d to			ted	above) who received m	ore than				
	\$100,000 of compensation from the organiz	ation 🚩				(							200	

Form 990 (2011)

Pa	irt VI	ii   Statement of Reve	nue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts Tts	1 a	Federated campaigns	1a					
ira our	b	Membership dues	1b			1		
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising events	1c					
ar /	c	Related organizations	1d			1		
s, C	e							
ion	f	All other contributions, gifts, gran		-				
but		similar amounts not included abo		125,995.				
ΞŎ		Noncash contributions included in lines	· ·					
and	_	Total. Add lines 1a-1f	J 14 11 V	<b>•</b>	125,995.	į		
				Business Code				
ą.	2 a	TUITION		611600	12,845.	12,845.		
ξ	b			0				
Program Service Revenue	c							
e a	d							
ğœ	e					1		
P.	f	All other program service reve	enue					
	a	Total. Add lines 2a-2f		<b>•</b>	12,845.			
	3	Investment income (including	dividends, inter	est, and				
·		other similar amounts)		•	41,485.			41,485.
	4	Income from investment of ta	x-exempt bond	proceeds ►				
	5	Royalties		<b>&gt;</b>				
	•	,	(i) Real	(ii) Personal	_ · ·			
i	6 a	Gross rents				}		
	b	Less rental expenses						
		Rental income or (loss)						
]		Net rental income or (loss)	•	<b>•</b>				
- 1	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory	586591	,		1		
	b	Less, cost or other basis						
ı		and sales expenses	568654	.				
	С	Gain or (loss)	17,937					
	d	Net gain or (loss)		<b>•</b>	17,937.			1 <u>7</u> ,937.
a	8 a	Gross income from fundraisin	g events (not					
ğ		including \$	of					
e		contributions reported on line	1c) See					
<u>الإ</u>		Part IV, line 18	а			ļ		
Other Revenue	b	Less: direct expenses	b					
١	С	Net income or (loss) from fund	draising events		<u> </u>	·		
	9 a	Gross income from gaming ac	ctivities See	1				
		Part IV, line 19	а					
	b	Less direct expenses	b					
	С	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а	<u></u>				
	b	Less cost of goods sold	b					
L	С	Net income or (loss) from sale	s of inventory	<b>▶</b>				
Į		Miscellaneous Revenu	18	Business Code				
ſ	11 a							
	b						· - · · ·	
	С							
ŀ	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>&gt;</b>				
	12	Total revenue. See instructions.		<u> </u>	198,262.	12,845.	0.	59,422.
13200 01-23-	12							Form <b>990</b> (2011)

Part IX | Statement of Functional Expenses

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

com	Diete columns (B), (C), and (D)		n Dort IV		
Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundráising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				<del></del>
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	!	ı		
	United States See Part IV, lines 15 and 16		··-·		/ <del></del>
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	40 434		40,434.	
_	trustees, and key employees	40,434.		40,434.	<del>.</del>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ļ			
_	persons described in section 4958(c)(3)(B)	22 015	8,161.	24,754.	<del>-</del>
7	Other salanes and wages	32,915.	0,101.	44,134.	
8	Pension plan accruals and contributions (include	Ì			
_	section 401(k) and section 403(b) employer contributions)				
9 10	Other employee benefits Payroll taxes	4,064.	329.	3,735.	
10	· · · · · · · · · · · · · · · · · · ·	4,004.	329.	<u> </u>	
11	Fees for services (non-employees).  Management				
a	Legal				· · · · · · · · · · · · · · · · · · ·
b	Accounting	7,331.		7,331.	
d	Lobbying	7,331.		7/3321	
e	Professional fundraising services. See Part IV, line 17		-		
f	Investment management fees				
g g	Other	•	<del></del>		<del></del>
12	Advertising and promotion				
13	Office expenses	3,091.	4-3-	3,091.	
14	Information technology				
15	Royalties				
16	Occupancy	22,885.		22,885.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	103.		103.	<u></u>
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,229.		20,229.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	EDUCATION & CULTURE	14,296.	14,296.		
b	MISCELLANEOUS EXPENSES	6,355.		6,355.	
С	NEWSLETTER & PUBLICATIO	4,374.		4,374.	
d	REPAIR	1,349.	· · · · · · · · · · · · · · · · · · ·	1,349.	
e	All other expenses	1,258.		1,258.	
25	Total functional expenses. Add lines 1 through 24e	158,684.	22,786.	135,898.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				600
132010	0.01-23-12				Form <b>990</b> (2011)

Га	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	_		239,590.	1	96,986.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		-	1,511.	4	4,130.
	5	Receivables from current and former officers, di	rectors	. trustees, kev			
		employees, and highest compensated employee		L L			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
	•	4958(f)(1)), persons described in section 4958(c					
	]	employers and sponsoring organizations of section					
		employees' beneficiary organizations (see instru				6	
sts	7	Notes and loans receivable, net	01.01.0,	-		7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges		-		9	3,024.
	l	Land, buildings, and equipment cost or other	1 1		<del></del>		
	l loa	basis Complete Part VI of Schedule D	10a	590,116.			
	١ ,	Less: accumulated depreciation	10b	369,095.	241,250.	10c	221,021.
	11	Investments - publicly traded securities	LIUD	303,033.	241,250.	11	221,021
	12	Investments - other securities See Part IV, line 1		1,053,960.	12	1,326,112.	
	13	Investments - program-related. See Part IV, line			1,000,000	13	1,520,112.
	14	Intangible assets	''			14	
	15	Other assets See Part IV, line 11				15	·-
	16	Total assets. Add lines 1 through 15 (must equal	al lina 3	), <sub>4</sub> )	1,536,311.	16	1,651,273.
	17	Accounts payable and accrued expenses	<u> </u>	,-,	4,168.	17	706.
	18	Grants payable		1/100.	18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		•		20	
m	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director		ŗ	····		
Ϊ		highest compensated employees, and disqualifi					
Ľį.		of Schedule L	ou poi	ono completo i art ii		22	
	23	Secured mortgages and notes payable to unrela	stad thi	rd narties		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa		Г Г			
		parties, and other liabilities not included on lines	•				
		Schedule D	,			25	
	26	Total liabilities. Add lines 17 through 25		Ţ	4,168.	26	706.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
S		lines 27 through 29, and lines 33 and 34.					
JCe	27	Unrestricted net assets		i	1,532,143.	27	1,650,567.
alaı	28	Temporarily restricted net assets				28	
9 9	29	Permanently restricted net assets				29	
Ĭ.		Organizations that do not follow SFAS 117, cf	eck h	ere 🕨 🔲 and	-		-,
F		complete lines 30 through 34.					
ts	30	Capital stock or trust principal, or current funds		30			
SSe	31	Paid-in or capital surplus, or land, building, or eq	nt fund		31		
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			<del>-</del>	32	
S S	33	Total net assets or fund balances		1,532,143.	33	1,650,567.	
	34	Total liabilities and net assets/fund balances		į	1,536,311.	34	1,651,273.

Form	1990 (2011) JEWISH FEDERATION OF SIOUX CITY	<u>42-</u>	06982	<u> 205</u>	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				62.
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u> 158</u>	6, 6	<u>84.</u>
3	Revenue less expenses Subtract line 2 from line 1	3		39	, 5	<u>78.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1_	<u>, 532</u>	2,1	<u>43.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5		78	3,8	<u>46.</u>
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1	<u>,650</u>	, 5	<u>67.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	X	
b	Were the organization's financial statements audited by an independent accountant?			2b		_X_
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	,			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both			1		
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit	1		
	Act and OMB Circular A-133?		ļ	3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired aud	iit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b		
				Form $\P$	<b>990</b> (	2011)

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

2011

Open to Public Inspection

**Employer identification number** Name of the organization 42-0698205 JEWISH FEDERATION OF SIOUX CITY Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv), (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 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 Type III - Other c \_\_\_\_ Type III - Functionally integrated a L\_\_\_ Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (vii) Amount of (ii) EIN organization in col. organization in col. (i) listed in your organization in col. (i) organized in the support organization (described on lines 1-9 (i) of your support? governing document? above or IRC section (see instructions)) No Yes Yes No

Schedule A (Form 990 or 990-EZ) 2011 JEWISH FEDERATION OF SIOUX CITY 42-0698205 Page 2

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

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

Se	ction A. Public Support									
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")	169,366.	167,764.	163,366.	132,309.	138,840.	771,645.			
2	Tax revenues levied for the organ-	•								
	zation's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities	-								
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	169,366.	167,764.	163,366.	132,309.	138,840.	771,645.			
	The portion of total contributions			1						
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included			:						
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)	İ								
6	Public support. Subtract line 5 from line 4						771,645.			
	ction B. Total Support	· ·-·-								
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
	Amounts from line 4	169,366.	167,764.	163,366.		138,840.	771,645.			
8	Gross income from interest,	,								
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources									
9	Net income from unrelated business	-								
_	activities, whether or not the						n			
	business is regularly carried on									
10	Other income. Do not include gain									
-	or loss from the sale of capital									
	assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10						771,645.			
	Gross receipts from related activities,	etc (see instruction	ons)			12				
	First five years. If the Form 990 is for	· · ·		d, fourth, or fifth ta	ax vear as a section	n 501(c)(3)				
	organization, check this box and stop	-	,			,,,,	<b>▶</b> □.			
Sec	tion C. Computation of Publi	c Support Per	centage		<u> </u>					
14	Public support percentage for 2011 (li	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	100.00 %			
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	100.00 %			
	33 1/3% support test - 2011. If the o			n line 13, and line	14 is 33 1/3% or m	ore, check this bo	ox and			
	stop here. The organization qualifies a	-					$\triangleright \mathbf{X}$			
b	33 1/3% support test - 2010. If the o	rganization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box			
	and stop here. The organization qualif	=								
17a	10% -facts-and-circumstances test	-			13, 16a, or 16b, a	and line 14 is 10%	or more,			
	and if the organization meets the "fact	-								
				_		· <b>3</b> ·				
h	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
.,	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the									
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.									
18	Private foundation. If the organization		<del>-</del>				s			
<u> </u>	roundation, it the organization	. Sid Hot Grieck at	20X 011 III 10 10, 10	.,		dule A (Form 990				

# Schedule A (Form 990 or 990-EZ) 2011 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

qualify under the tests listed be	elow, please com	plete Part II)		<del></del>	<u> </u>	
Section A. Public Support		<del></del>	т	1-	<del></del>	
Calendar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants.")	· <del>-</del> · · · · · · · · · · · · · · · · · · ·	<del> </del>				
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to				1		
the organization without charge		L			<u> </u>	<u> </u>
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the					_	
amount on line 13 for the year  c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)					<del></del>	
ection B. Total Support				<u> </u>		<u> </u>
alendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	(-)	(4) = 333	(4) = 333	(4) == ==	. , , , , , , , , , , , , , , , , , , ,	1-2
Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
3 Total support (Add lines 9, 10c, 11, and 12)				l	J	
4 First five years. If the Form 990 is for t	the organization'	s first, second, thir	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here			· · · · · · · · · · · · · · · · · · ·			<b>▶</b> □
ection C. Computation of Public	Support Pe	rcentage			<del></del>	
5 Public support percentage for 2011 (lir	ne 8, column (f) d	livided by line 13, c	olumn (f))		15	
Public support percentage from 2010					16	
ection D. Computation of Inves	tment Incom	e Percentage			r	
7 Investment income percentage for 201	1 (line 10c, colui	mn (f) divided by lin	ie 13, column (f))		17	
Investment income percentage from 20	<b>010</b> Schedule A,	Part III, line 17			18	
9a 33 1/3% support tests - 2011. If the c	organization did i	not check the box	on line 14, and line	15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	d stop here. The	e organization quali	fies as a publicly s	supported organi	zation	▶□
b 33 1/3% support tests - 2010. If the cline 18 is not more than 33 1/3%, check	-					. —
Private foundation if the organization			•		•	

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

2011
Open to Public Inspection

Name of the organization

Employer identification number

	JEWISH FEDERATION OF SIOUX CITY	42-0698205
Pa		Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fu	inds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	
	impermissible private benefit?	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	/, line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education) Preservation of an historical	ally important land area
	Protection of natural habitat Preservation of a certified I	historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution contribution in the form of a conservation contribution co	conservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
¢	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	anization during the tax
	year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the o	rganization's accounting for
Dat	conservation easements t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets
Pai		Olilliai Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	and halance sheet works of art
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	
		provide, in all xiv,
	the text of the footnote to its financial statements that describes these items  If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	balance sheet works of art, historical
D	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public s	
		ervice, provide the following amounts
	relating to these items:	•
	(i) Revenues included in Form 990, Part VIII, line 1	► \$ ► \$
_	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain	i, piovide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	<b>▶</b> \$
	Revenues included in Form 990, Part VIII, line 1	► \$ ► \$
þ	Assets included in Form 990, Part X	Ψ

		FEDERATION						<u>42-06</u>			age 2
Pa	rt III Organizations Maintaining C										
3	Using the organization's acquisition, accessi	on, and other recor	ds, chec	k any of the	following that	at are a si	gnificant	use of its	collection	ıtem	s
	(check all that apply)										
а	Public exhibition	•	a 🖳	Loan or exc	hange progra	ams					
b	Scholarly research	•	e 📖	Other							
С											
4	Provide a description of the organization's co	ollections and expla	ın how tl	ney further t	he organizati	on's exe	npt purp	ose in Par	t XIV		
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er sımılar	assets		-	_	_
	to be sold to raise funds rather than to be ma								Yes		<u>No</u>
Pa	rt IV Escrow and Custodial Arran	•	lete if the	e organizatio	on answered	"Yes" to	Form 990	), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	ssets not	ıncluded		_	_	٦.
	on Form 990, Part X?							L	」Yes	L	No
b	If "Yes," explain the arrangement in Part XIV	and complete the f	ollowing	table.							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				_
<b>2</b> a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?					<u> </u>	Yes		J No
	If "Yes," explain the arrangement in Part XIV										
Pa	rt V   Endowment Funds. Complete r	f the organization a	nswered	"Yes" to Fo	orm 990, Part	IV, line 1	0.	<del></del>	r		
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	<b>(d)</b> Three	years back	(e) Four	years	back
1a	Beginning of year balance		ļ								
b	Contributions								,		
С	Net investment earnings, gains, and losses		<u> </u>								
d	Grants or scholarships		ļ		ļ		<del></del>				
е	Other expenditures for facilities										
	and programs				<u></u>				<u> </u>		
f	Administrative expenses										
g	End of year balance								<u> </u>		
2	Provide the estimated percentage of the curr	ent year end balan	ce (line 1	g, column (a	a)) held as						
а	Board designated or quasi-endowment		%								
b	Permanent endowment >	%									
С	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c should										
За	Are there endowment funds not in the posse	ssion of the organiz	zation th	at are held a	and administe	ered for t	he organı	zation	٦		
	by·									Yes	No
	(i) unrelated organizations								3a(i)		ļ
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	listed as required	on Sche	dule R?					3b		L
4	Describe in Part XIV the intended uses of the										
Pa	rt VI   Land, Buildings, and Equipm	ent. See Form 99	0, Part X	(, line 10	· · · · · · · · · · · · · · · · · · ·		_				
	Description of property	(a) Cost or obasis (invest			t or other (other)		ccumulat oreciation		(d) Book	valu	e
1a	Land										
b	Buildings										
С	Leasehold improvements			53	35,002.		314,8	83.	220	0,1	
d	_			2	28,184.		27,2	82.		9	02
	Other				26,930.		26,9	30.			0.
Total	I. Add lines 1a through 1e (Column (d) must e	gual Form 990, Par	t X, colui	nn (B), line	10(c))				22:	1,0	21.

(7) (8) (9)(10)(11)

$\overline{}$	edule D (Form 990) 2011 JEWISH FEDERATION OF SIOUX rt XI Reconciliation of Change in Net Assets from Form 990 to		ncial State	42-069820 ements	5 Page <b>4</b>
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		
4	Net unrealized gains (losses) on investments		4	<del></del>	
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7	· · · · · · · · · · · · · · · · · · ·	
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net) Add lines 4 through 8		9	<del></del>	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	4 9	10		
	t XII Reconciliation of Revenue per Audited Financial Stateme			Return	
1	Total revenue, gains, and other support per audited financial statements	·	<u>-</u>	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b		7	
c	Recoveries of prior year grants	2c		7	
d	Other (Describe in Part XIV)	2d		7 ]	
е	Add lines 2a through 2d			7 2e	
3	Subtract line 2e from line 1			3	
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	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	enses per	r Return	
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1			
а	Donated services and use of facilities	2a		4	
b	Prior year adjustments	2b		4	
C	Other losses	2c		-	
d	Other (Describe in Part XIV)	2d		4	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<del></del> -		
	Other (Describe in Part XIV)	4b		<b>┤                                    </b>	
_	Add lines 4a and 4b			4c	
5 Dar	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  t XIV Supplemental Information	<del></del>		5	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	Lines to and 4. D	art IV Junea 1	th and the Bart V lu	no 1: Port
,	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III $_2$ 2, Part XI, line 8, Part XII, lines 2d and 4b. Also comp	•	•		ie 4, rait
		<del></del>	-		
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				· · · · · · · · · · · · · · · · · · ·	
					<del></del>

### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service

Employer identification number

JEWISH FEDERATION OF SIOUX CITY 42-0698205
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION CONSIDERS ANY
INDIVIDUAL CONTRIBUTING \$25 OR MORE TO BE A MEMBER. ALL MEMBERS HAVE THE
RIGHT TO BECOME A DIRECTOR.
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY GOVERNING
BOARD BEFORE IT IS FINALIZED AND FILED WITH THE INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12A: THE ORGANIZATION DOES NOT
CURRENTLY HAVE A WRITTEN CONFLICT OF INTEREST POLICY. THE ORGANIZATION
IS A SMALL SOCIAL SERVICES NON-PROFIT AND HAS A SMALL BOARD OF
DIRECTORS. THEY WILL LOOK INTO ESTABLISHING CONFLICT OF INTEREST AND
WHISTLE BLOWER POLICIES.
FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION FOR THE SHARED WAGES
FOR THE EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES IS DETERMINED BY THE
BOARD OF DIRECTORS. THEY ALSO PERFORM THE ANNUAL REVIEW RELATED TO THESE
EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES ITS FORM 990
AVAILABLE TO INDIVIDUALS UPON REQUEST.
FORM 990, PART VI, SECTION C, LINE 19: NO DOCUMENTS AVAILABLE TO THE
PUBLIC
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:
NET UNREALIZED GAINS ON INVESTMENTS: 78,846

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization  JEWISH FEDERATION OF SIOUX CITY	Employer identification number 42-0698205
JEWISH FEDERATION OF STOUX CITY	42-0090203
505V 000 5155 VII 17V5 00	
FORM 990, PART XII, LINE 2C:	
NO CHANGE	

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

# Related Organizations and Unrelated Partnerships

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

2011 Open to Public Inspection

OMB No 1545-0047

**Employer identification number** 42-0698205

JEWISH FEDERATION OF SIOUX CITY Name of the organization

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

Part

Direct controlling ε End-of-year assets **e** Total income ਉ Legal domicile (state or foreign country) Primary activity <u>@</u> Name, address, and EIN of disregarded entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Part

(a)	(q)	(0)	(p)	(e)	(j)	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Пg	Section 512(b)(13)	(b)(13) ad
of related organization		foreign country)	section	status (if section	entity	entity	
				501(c)(3))		Yes	N <sub>o</sub>
CONGREGATION BETH SHALOM - 42-1425453							
815 38TH STREET	RELIGIOUS ORGANIZATION						
SIOUX CITY, IA 51104	(JEWISH TEMPLE)	IOWA	501(D)	сниксн			×
					:		
	<u> </u>	-					

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

Schedule R (Form 990) 2011

132161 01-23-12 LHA

Page 2

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

3	General or Percentage managing ownership partner?		•								e related	3	Percentage ownership	1									Schedule R (Form 990) 2011
9	General or managing partner?					-	 	-	-		or mor				-					-			R (Form
<b>E</b>	-UBI n box edule 1065)				-						ecause it had one	(6)	otal Share of end-of-year assets				<u></u>						Schedule
£	Disproportion- ate allocations?				 <del></del>	-					t IV, line 34 b	(£)	Share of total income			-							
(B)	of ⁄ear s										to Form 990, Par	(e)	Type of entity (C corp, S corp, or trust)	,									
æ	Share of total income						 				on answered "Yes"	(p)	Direct controlling entity										
(e)	Predominant income (related, unrelated, excluded from tax under sections 512-514)										if the organizati	(0)	Legal domicile (state or foreign country)						-				
	Predo (relat exclude secti									 	mplete		/ıty										
	Direct controlling entity										ration or Trust (Co	(q)	Primary activity										
<u> </u>	Legal domicile (state or foreign country)										as a Corpo												
(p)	Primary activity										janizations Taxable poration or trust duri		<b>≥</b> c					ŀ					
(a)	Name, address, and EIN of related organization										Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(e)	Name, address, and EIN of related organization										132162 01-23-12

. . .

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes No
1 Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	slated organizations listed	ın Parts II-IV?	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				Ta X
<ul> <li>Gift, grant, or capital contribution to related organization(s)</li> </ul>				tb X
c Gift, grant, or capital contribution from related organization(s)				tc X
d Loans or loan guarantees to or for related organization(s)				·
e Loans or loan guarantees by related organization(s)				1e X
(A) and the solution of the so				
				#
				19 X
h Exchange of assets with related organization(s)				th X
i Lease of facilities, equipment, or other assets to related organization(s)				i=
j Lease of facilities, equipment, or other assets from related organization(s)				<del>×</del>
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			
I Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			X wt
n Sharing of paid employees with related organization(s)				T X
<ul> <li>Reimbursement paid to related organization(s) for expenses</li> </ul>				×
				╀
<ul> <li>Qther transfer of cash or property to related organization(s)</li> <li>Other transfer of cash or property from related organization(s)</li> </ul>				1q X
2 If the answer to any of the above is "Yes" see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds	
1	(a)	(9)	(d)	
Name of other organization	Transaction type (a-r)	Amount involved	Method of determining amount involved	
(1) CONGREGATION BETH SHALOM	Z	73,349.	73,349.ALLOCATED COSTS	
3				
(3)				:
(4)				
(6)				•
(6)				
132163 01-23-12			Schedule	Schedule R (Form 990) 2011

Page 4

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.

indicated and a related organization over instructions regarding exclusion for certain investment partities lips.	the charles regarding excita	Sion for certain line	Samient partitional lips.		,			:	
(a) Name address and FIN	(b) Primary activity	(c)	Predominant income	(I)	(g) Chare of	(n)	(I)	(1)	, (K)
of entity	(1000)	(state or foreign country)	(related, unrelated, ours?) ours? under section 512-514) Yes No		end-of-year assets	allocations?	blother amount in box 20 managing ownership allocations? of Schedule K-1 partners ownership Ves No (Form 1065) ves No	managing partner?	ercentage ownership
								-	
								_	
		_						_	
•									
								-	
			-						
				-					
						-			
		-	•						

Schedule R (Form 990) 2011

Schedule R	(Form 990) 2011	JEWISH	FEDERATION	OF SIOUX	CITY	42-0698205 Page 5
Part VII	(Form 990) 2011 Supplemental Info	rmation				
		i i i i i i i i i i i i i i i i i i i			Oabadula Difasa	
	Complete this part to pr	ovide additional	information for respon	ises to questions	on Schedule H (see ins	tructions).
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Schedule R (Form 990) 2011

Tewish Federation 8/3/1/12

Approved by
Prepared by

Initials
Date

	I T	0698205	2	3	4 ====
		Proceeds			Salestote
1/-/-					
9/23/11	Clearbridge Energy	1720	111/677		9/23/1
4	Tortise MLP Find	1547	1579		9/25/11
9/20/11	GNMA PL # 356411C DID	4/20	1170		
9/20/11	Ginic Mae Series 2004-104	123914	123914		20
9/26/11	FNMA ASN GTD	298	298		27
9/26/11	CMST	515664	5/5663		10/2/0
999999	Various - Kerum of Phipipel	12451535	2451535		47
12/2/11	Wellstang StP500	427315	427315		12/20/11
1/27/12	logg Battery SIP500	1783946	1708499		1/4
	00_ 00 -	28107	26636		54
2/13/12		5033350	500000		12/19/04
4/20/12	GAUMA	1785	11785		er
5/3/12		16527 40	1688818		1/49/10
7/11/12	FT (NICTO)	1529930	1689000		126/10
999999	Listing Attached 3122-3530	15868011	1346348		47
_		8851776	88738/3		S
1/27/12	FT NASDAR 100 Teck	2730710	2656085		6/28/11
	FT 11 MATLS	2534956	7600991		6/28/11
	FT NYSE BLOTECH	7330052	2576909		6/24/11
	STMT Feb 2012-1180/504	60 15428	5994873		57
	STMT May 2012 - 1190-154/2	39/24/27	4124176		37
8/6/12	Freit	621100	366196		1/23/12
	FT CABMR DSCR	470514	485100		128/1
	FT CUSING STPL	485023	5055 30		2/29/12
	FILL HLTH	576077	500967		1/27/12
7	FT M ENTERNEA	555516	55/8/93		10/28/1
8/6/12	FT CNSMR DSCR FT CNSMR STPL FT IN HLTH FT DS INTERNEY VANGRO EXT DUR	394521	364258		5/15/12
-1-11-6-		111111111111111111111111111111111111111		<del>- - - - </del>	77377
		58659132	56865477	1793710	
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# JEWISH FEDERATION OF SIOUX CITY IOWA

# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16



SUBACCOUNT ACTIVITY continued

\$0.00 Margin \$5244,298,21 Money Market Cash Date Activity Quantity Price Description Total

# REALIZED GAINS/(-)LOSSES |

ACTIVITY DETAILS continued

This section presents estimated realized gains or losses for your information only, and should not be used for tax purposes. To calculate gains or losses, the position with the highest purchase price has been liquidated first unless you have instructed us otherwise. We suggest you review this information for accuracy and contact your Baird Financial Advisor with any questions

				•	,	•	•
	Date Date		Purchase	Sale	Cost	Sale	Realized
	Acquired Sold	Quantity	Price	Pnce	Basis	Proceeds	Gain/(-)Loss*
Stocks/Options			·				<u> </u>
ACCENTURE PLC IRELD CL A	· 07/22/08 n 01/27/12	11	39 4500	56.7500	3,038 41	4,369.66	1,331 25 (LT)
	01/06/11 n 01/27/12	20	48 0700	56 7500	961 40	1,134 98	173 58 (LT)
		26			3,999 81	5,504 64	1,50483
AMPHENOL CORP CL A NEW	01/04/12 c 01/27/12	0 018	45 7100	54 7100	0.81	66 0	0 18(ST)
	06/19/08 n 01/27/12	24	49,6300	54 7100	1,191 12	1,313 01	121 89 (LT)
	01/06/11 n 01/27/12	30	51 9200	54 7100	1,557 60	1,641 26	83 66 (LT)
		54.0180			2,749 53	2,955 26	205 73
ANCESTRY COM INC	07/28/11 n 01/27/12	99	40 8300	31 4400	2,450 12	1,886 36	-563 76(ST)
ANHEUSER BUSCH INBEV	03/02/11 n 01/27/12	98	56 1900	61 5000	4,833 17	5,288 89	455 72(ST)
APPLE INC	07/24/09 n 01/27/12	13	158 8900	445 7600	2,065 60	5,794 76	3,729 16 (LT)
BASF SE	10/20/09 n 01/27/12	52	29.9500	29 6000	3,297 25	4,377 91	1,080 66 (LT)
	01/06/11 n 01/27/12	10	75 4500	79 6000	754 50	795 99	41 49 (LT)
		65			4,051 75	5,173 90	1,12215
BHP BILLITON LIMITED ADR	06/19/08 n 01/27/12	4	86 8000	29 9900	3,558 80	3,279 52	-279 28 (LT)
	01/06/11 n 01/27/12	9	89 3400	79 9900	893 40	799 89	-93 51 (LT)
		51			4,452 20	4,079 41	-37279
BRIT AMER TBCCO SPNS ADR	06/19/08 n 01/27/12	48	71 2000	92 5500	3,417 60	4,442 30	1,024 70 (LT)
	01/06/11 n 01/27/12	15	76 9200	92 5500	1,15380	1,388 23	234 43 (LT)
		83			4,571 40	5,830 53	1,259 13
CAPITAL ONE FINL CORP	12/02/11 n 01/27/12	0.112	45 0700	45 6901	5 05	511	0 06(ST)
	08/04/10 n 01/27/12	70.888	41 6700	45 6901	2,954 54	3,238 81	284 27 (LT)
	08/04/10 n 01/27/12	0.112	41 6700	45 6901	4 66	514	0 48 (LT)
	01/06/11 n 01/27/12	30	45 3600	45 6901	1,360 80	1,370 67	9 87 (LT)
		101.1120			4,325 05	4,619 73	294 68
CASH AMER INTL INC	05/18/11 n 01/27/12	55 963	48 8100	43 8900	2,731 72	2,456 16	-275 56(ST)
	05/18/11 n 01/27/12	0 037	48 8100	43 8900	1 80	163	-0 17 (ST)
	11/16/11 n 01/27/12	0 037	52 9100	43 8900	1 96	1 62	-0 34(ST)
		56 0370			2,735 48	2,459 41	-276 07
CELGENE CORP	11/19/10 n 01/27/12	23	60.7300	72 9900	3,218 98	3,868 39	649 41 (LT)
	01/06/11 n 01/27/12	20	29 6200	72 9900	1,193 00	1,459 77	266 77 (LT)
		73			4,411 98	5,328 16	916 18
COMCAST CORP CLASS A NEW	03/02/11 n 01/27/12	175	25 1000	26 3641	4,393 94	4,613.62	219 68 (ST)
	10/26/11 n 01/27/12	0 232	24 4260	26 3641	2 67	6 11	0 44(ST)
		0 574	24 4260	26 3641	14 02	15 15	1 13(ST)
	01/25/12 c 01/27/12	0 768	25 7608	26.3641	19 78	20 24	0.46(ST)
		176 57 40			4,433 41	4,655 12	221 71
CONOCOPHILLIPS	12/01/11 n 01/27/12	0 620	71.3402	68 9100	44 22	42.72	-1 50(ST)



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# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16



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Stocks/Options continued	Date Acquired	Date Sold	Quantity	Purchase Pnce	Sale Pnce	Cost Basis	Sale Proceeds	Realized Gain/(-)Loss*
		01/27/12	51 380		68 9100	2,938 03	3,540 52	602 49 (LT)
	08/04/10 n 01/27/12 - 01/06/11 n 01/27/12	01 <i>/27/</i> 12 01 <i>/27/</i> 12	0 620 15	57 1800 67 1700	68 9100 68 9100	35 45 1 007 55	42 74 1 033 62	7 29 (LT) 26 07 (LT)
			67.6200		200	4,025,25	4,659 60	634 35
DARDEN RESTAURANTS INC	05/18/11 n 01/27/12	127/12	57	50 5000	46 2200	2,879 06	2,634 47	-244 59(ST)
	11/01/11 n 01	127/12		47 0208	46 2200	2451	24 09	-0 42(ST)
DECIDE 9 COMOANY	77101130	0.51	57 5210			2,903 57	2,658 56	-245 01
	21//2/10 n 11/81/60 21//0/11 n 01/2/12	01/2//12	0.271	85 3200 72 6619	87 2400	4,095 50 10 68	4,187 42	91 92(ST)
		71117	48 2710	12.0013	00.47	411518	4 211 07	95.89
DIAGEO PLC NEW SPONS ADR	09/01/11 n 01/27/12	127/12	49	80 6100	88 4200	3,950 05	4,332 49	382 44(ST)
ENERSYS	03/02/11 n 01/27/12	127/12	73	34 5800	29 3500	2,52469	2,142 50	-382 19(ST)
ENTERTAINMENT PPTYS TR	10/17/11 n 01/27/12	127/12	0 151	38 5400	44 5000	583	671	0 88(ST)
	10/17/11 01 04/17/12 04	01/27/12	0 793	38 5400	44 5000	30 57	35 30	4 73(ST)
	01/11/12c 01 06/19/08 p 04	01/2//12	0.849	43 6400 64 0000	94 5000	37.06	3/ /8	0 /2(ST)
	01/06/11 n 01	01/27/12	, t	54 9000 45 4200	44 5000	2,235 /4 454 20	1,656 95	.300 /8 (LT)
			53 7930	007	2000	2.763.40	2.393 74	-369 69
ESTERLINE TECHNOLOGIES C	01/30/09 n 01/27/12	127/12	40	36 5400	61 4100	1,461 81	2,456 35	994 54 (LT)
FBL FINL GROUP INC A	07/28/11 n 01/27/12	127/12	92	31 2700	34 1200	2,877.35	3,138 97	261 62(ST)
GAMESTOP CORP NEW CL A	07/24/09 n 01/27/12	127/12	9/	23 4900	24 4100	1,785.35	1,855 12	(LT) 22
	01/06/11 n 01/27/12	127/12	09	20 9900	24 4100	1,259 40	1,464 57	205 17 (LT)
			136			3,044 75	3,319 69	274 94
GENL CABLE CORP	05/14/10 n 01	01/27/12	<u>გ</u> გ	33 0000	31 5100	1,914 08	1,827 53	-86 55 (LT)
	Z1//Z/LD U 11/90/10	71/17	52	33 9400	31 5100	848 50	787 74	-60 76 (LT)
SOCIE INC CLA	07/24/00 - 04	07/40	3 1	440,000	00444	2,762.58	7,515.27	-14/ 31
HESS CORP	07/24/09 n 01/27/12	21112	/ 22	440 9200	5/4 1500	3,086 48	4,018 97	932 49 (L1)
	01/03/12 c 01/27/12	127/12	0 114	58 7100	54 8500	4,765.23 6.70	3,074.86	-1,090 37 (ST) -0 44(ST)
			67 1140			4,771 93	3,681.12	-1,090 81
HOLLYFRONTIER CORP	07/28/11 n 01/27/12	127112	82	35 9100	29 8200	2,945 39	2,445 18	-500 21 (ST)
	12/08/11 n 01/27/12	127/12	1 668	23.1842	29 8200	38 69	49 74	11 05(ST)
	12/08/11 n 01	01/27/12	0 100	23 1842	29 8200	231	2 99	0 68(ST)
	01/04/12 01	01/2///2	0.332	0092 97	29 8200	8.38	990	10000
HINTINGTON INCALLS INDS	01/06/11 5 01/27/12	177113	1000	28 6700	36 0500	38 68	36 04	-1 74 (I T)
ICU MEDICAL INC	07/28/11 n 01/27/12	27/72	- 09	42.2600	45 4800	2 536 05	2 728 74	(192 69 (ST)
ILLINOIS TOOL WORKS INC	07/28/11 n 01/27/12	127/12	6	50 4900	52 7400	4 645 88	4 851 97	(TS)60 90C
-	10/12/11 n 01	01/27/12	0 314	45 0455	52 7400	14 15	16.56	2.41(ST)
	10/12/11 n 01	127/12	0 421	45 0455	52 7400	18 97	22.21	3.24(ST)
	01/10/12 c 01	01/27/12	989 0	48 6260	52 7400	33 38	36 18	2 80(ST)
			93 4210			4,712.38	4,926 92	214 54
JPMORGAN CHASE & COMPANY	10/31/11 n 01/27/12	127/12	0 723	35 9576	37.3941	26 00	27 03	1 03(ST)
	11/03/03 n 01/2//12	/2//12	1 034	36 2200	37 3941	37.47	38 68	1 21 (LT) 3 30 (LT)
	10 = F000000	71117	706 1	0001	160 10	3	<u>r</u> r	(17) 00 0-

# JEWISH FEDERATION OF SIOUX CITY IOWA

# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16



REALIZED GAINS/(-)LOSSES continued							1
			Purchase	Sale	Cost	Sale	Realized
Stocks/Options continued	Acquired Sold	Quantity	Price	Рпсе	Basis	Proceeds	Gain/(-)Loss*
		2077	37 6500	37 3941	78.21	79 77	-0 54 (LT)
	08/03/04 n 01/27/12	1 635	37 4500	37 3941	61 23	61 13	· -0 10 (LT)
	02/01/05 n 01/27/12	0.570	37 5000	37 3941	22.35	21 56	-0 /9 (L1)
		0 256	35 5500	37 3941	912	9 28	· 0.46 (LT)
		0.230	35 5500	37 3941	8 18	8 64	0 46 (LT)
		0 492	35 4700	37 3941	17 46	18 47	1 01 (LT)
		0 479	36 7900	37 3941	17 64	17 93	0 29 (LT)
	01/19/06 n 01/27/12	13	39 0600	37 3941	507 79	486 11	-21 68 (LT)
		0.446	39.8800	37 3941	17.79	16 68	-1 11 (L l ) 2 79 (l T)
		0 492	45 7900	37 3941	22 55 22 55	18 41 18 41	-3 /0 (L1) -4 14 (LT)
		0 477	47 5400	37 3941	22.71	17 86	-4 85 (LT)
		0 448	51 0100	37 3941	22 88	16 77	-6 11 (LT)
		0 439	52 4000	37 3941	23 02	16 43	-6 59 (LT)
		0 523	43 7000	37.3941	22 85	19 56	-3 29 (LT)
		0 505	45 5900	37 3941	23 05	1891	4 14 (LT)
	02/01/08 n 01/2//12 03/19/08 n 01/2//12	0 491 19	47.2700	37 3941	23.25 816.55	18 39	-4 86 (LT)
		0 639	47 9700	37 3941	30.65	23.89	-106 U/ (L1) -6 76 (LT)
		38	38 5600	37 3941	1,465 28	1,420 96	-44 32 (LT)
	01/06/11 n 01/27/12	19 671	44 5100	37 3941	875 59	735 60	-139 99 (LT)
		104 7230			4,274 06	3,915.94	-358 12
LITTELFUSE INC	08/04/10 n 01/27/12	45	35 7700	52 4000	1,609 70	2,357 95	748 25 (LT)
M&T BANK CORP	05/16/11 n 01/27/12	1 982	86 5200	80 0700	121 39	158 69	37 30 (ST)
	1730/11 11 01/2//12	0.010	0/01//	00/00	040	450	0.04(51)
OLA CHARACTER HANDER	02/20/10 - 04/0/00	7	0007	0001.00	97 771	160 13	37.34
MINS INSTRUMENTS INC	01/06/11 n 01/27/12	9 9 9	23 9800	30 5833	1,826 /9 839 30	2,599 52 1,070 40	772 73 (LT) 231 10 (LT)
		120			2,666 09	3,669 92	1,003 83
MAGELLAN HLTH SVCS NEW	11/19/10 n 01/27/12	4	49 4800	20 0000	2,177 55	2,199 95	22.40 (LT)
	01/06/11 n 01/27/12	15	48 1300	20 0000	721 95	749 99	28 04 (LT)
		85			2,899 50	2,949 94	50 44
NEWPARK RES INC NEW	0//28/11 n 01/2//12	310	9 5800	8 6200	2,970 70	2,672.14	-298 56(ST)
NOVAK IIS AG SPONS ADR	02/20/08 n 01/2//12	10.605	49 5600	54 4100	525 70	577 05	51.35 (LT)
	04/14/08 n 01/27/12	0.987	47 1300	54 4100	737 30 46 53	53.71	30 03 (L1) 7 18 (L1)
	06/19/08 n 01/27/12	. S.	50.7500	54 4100	1 979 25	2 121 94	142 69 (LT)
	01/06/11 n 01/27/12	14 406	58 0100	54 4100	835 74	783 88	-51 86 (LT)
		80			4,144 72	4,352 71	207 99
OIL STATES INTL INC	11/19/10 n 01/27/12	37	58 0300	80 2000	2,147 17	2,967 33	820 16 (LT)
	01/06/11 n 01/27/12	10	62 1300	80 2000	621 30	801 99	180 69 (LT)
DEBOICO INO	0450140 - 0450140	4/	0000	000	2,768 47	3,769.32	1,000 85
PERSICO INC	05/14/10 n 01/27/12	0.484 47.516	66 1400	65 8400	32.45 3,142.98	31 86 3,128 38	-0 59(ST) -14 60 (LT)



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# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16



REALIZED GAINS/(-)LOSSES continued	ed						
		į	Purchase	Sale	Cost	Sale	Realized
Stocks/Options continued	Acquired	Quanny	FIICE	Luce	Days S	Proceeds	Gallu(-)Loss
	05/14/10 n 01/27/12	0 484	66 1400	65 8400	32 01	31 89	-0 12 (LT)
	01/06/11 n 01/2//12	15 63 4840	66 6100	65 8400	999 15	98/5/	-11 58 (LT) -26 89
PORTLAND GEN ELEC CO	09/01/11 n 01/27/12	95	24 0600	25 0600	2,285 86	2,380 64	94 78(ST)
	10/17/11 n 01/27/12	0 980	24 0270	25 0600	23 55	24 56	· 101(ST)
	10/17/11 n 01/27/12	0 088	24 0270	25 0600	1 63	171	0 08(ST)
	01/17/12 c 01/27/12	1 020	24 9527	25 0600	25 45	25 56	0 11 (ST)
		97 0680			2,336 49	2,432 47	95 98
PRECISION CASTPARTS CORP	06/19/08 n 01/27/12	29	109 8200	164 8500	3,184 78	4,780 55	1,595 77 (LT)
PROGRESS SOFTWARE CORP	03/02/11 n 01/27/12	88	28 2500	22 2200	2,486 02	1,955 32	-530 70(ST)
REINSURANCE GRP AMER NEW	05/18/11 n 01/27/12 11/25/11 n 01/27/12	0 164	62 1100 48 3300	55 9600 55 9600	2,733 24 7 92	2,462 19 9 18	-271 05(ST) • 1 26(ST)
		44 1640			2,741 16	2,471 37	-269 79
RELIANCE STEEL & ALUM CO	03/02/11 n 01/27/12	54	53 8900	54 7400	2,910 32	2,955 90	45 58 (ST)
ROPER INDUSTRIES INC NEW	10/28/11 n 01/27/12	0 054	81 9300	94 4800	4 40	5 10	0 70(ST)
	01/27/12 c 01/27/12	0.054	93 9800	94 4800	5.05	511	0.06(ST)
	10/20/08 n 01/2//12	39 946	44 4/00	94 4800	1,7669	3,77401	1,997 32 (L1)
		40 0540			1,786 14	3,784 22	1,998 08
SAINT JUDE MEDICAL INC	03/02/11 n 01/27/12	9	48 2900	41 1800	4,394 /4	3,747.30	-647 44(ST)
	21//2/10 n 11/15/01	0 482	39 6521	41 1800	1000	19 60	0 74(51)
	011111111111111111111111111111111111111	91 4820	001007	00,000	4,413.85	3,707,5	-046 /U
SAP AG SPONS ADR	05/14/10 n 01/2//12	6 ห	43 9/00	60 2400	3,078 54	4,216 /1	1,138 17 (LT) 262 73 (LT)
	01/00/11 11 01/2/11/2	50 29	49 / 300	00.2400	7 321 70	5 722 69	1 400 90
GOV SHOOP OF SHELLING	C117C110 = 111C01E0	35	131 0700	005 0 20	4,321,73	3,757,85	1 206 08/CT
SIEMENS A G SPONS AUR	05/10/11 11 01/2/12	2 8	20000	52 7200	4,730.93	3,434,03	1 550 05(31)
IOIAL S A SPONS ADR	01/06/11 n 01/27/12	۶ م م	/9 9200 54 1800	52 7200 52 7200	1,525 40	3,004 30 1,581 57	-1,330 45 (L1) -43 83 (LT)
		87			6,18084	4,586 55	-1,594 29
TRANSCANADA CORP	09/01/11 n 01/27/12	06	43 1400	41 4500	3,882 68	3,730 42	-152 26(ST)
UDR INC	10/31/11 n 01/27/12	0 873	24 2843	25 8301	21 20	22 54	1 34(ST)
	10/20/08 n 01/27/12	88	18 2200	25 8301	1,457 80	2,066 36	608 56 (LT)
	12/09/08 n 01/27/12	5 127	11 7100	25 8301	90 09	132 42	72 36 (LT)
	12/09/08 n 01/27/12	0 873	11 7100	25 8301	10 22	22 57	12 35 (LT)
	21/12/10 A 11/60/10	405 0720	0066 77	1000 07	459 00	2760 48	30 /9 (L1)
	CHEC. 10 - 11/00/100	100 07 30	0070	20.5404	2,003.00	4 062 40	T3/03/04
UNILEVER PLC SPONS AUR	07/28/11 n 01/2//12	149 593	32 3700	32 5101	4,643,66	4,065 10	(TS)20(ST)
	12/14/11 0 01/27/12	1 407	32 6872	32 5101	45.99	45 74	-0.25(ST)
	1	151 4070	7		4 902 84	4 922 16	19 32
VECORP	12/19/11 n 01/27/12	0.217	129 6000	130 6400	28 08	28 34	0 26(ST)
	07/22/08 n 01/27/12	16	72 4700	130 6400	1,159 56	2,090 19	930 63 (LT)
	02/04/10 n 01/27/12	12 783	71 5800	130 6400	915 07	1,669 94	754 87 (LT)
		0 217	71 5800	130 6400	15 53	28 37	12.84 (LT)
	01/06/11 n 01/27/12	10	84 1000	130 6400	841 00	1,306.37	465 37 (L1)
		39.21.70			7,909 24	0,12321	76 501,7

# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16

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REALIZED GAINS/(-)LOSSES continued								
	Date	Date		Purchase	Sale	Cost	Sale	Realized
	Acquired	Sold	Quantity	Pnce	Price	Basis	Proceeds	Gain/(-)Loss*
Stocks/Options continued			i			,		
VARIAN MED SYS INC	02/04/10 n 01/27/12	01/27/12	39	49 0000	9229	1,911 33	2,588 37	· 677 04 (LT)
	01/06/11 n 01/27/12	01/27/12	5	0000 69	92200	345 15	331 85	-13 30 (LT)
			4			2,256 48	2,920 22	663 74
VENTAS INC	12/30/11 n 01/27/12	01/27/12	0 498	55 4762	58 4900	27 60	29 12	1 52(ST)
	06/19/08 n 01/27/12	01/27/12	32 502	44 8800	58 4900	1,458 69	1,901 00	442 31 (LT)
	06/19/08 n 01/27/12	01/27/12	0.498	44 8800	58 4900	22 35	29 14	· 6 79 (LT)
	01/06/11 n 01/27/12	01/27/12	15	52 8000	58 4900	792 00	877 33	85 33 (LT)
			48 4980			2,300 64	2,836 59	535 95
VISA INC CLASS A	07/28/11 n 01/27/12	01/27/12	52 879	87 1500	100 5400	4,608 65	5,316 34	707 69(ST)
	07/28/11 n 01/27/12	01/27/12	0 121	87 1500	100 5400	10 54	12 18	1 64(ST)
	12/06/11 n 01/27/12	01/27/12	0 121	96 2076	100 5400	11 66	12 16	0 50(ST)
			53 1210			4,630 85	5,340 68	709 83
VORNADO REALTY TRUST	11/23/11 n 01/27/12	01/27/12	0 269	71 8669	80 5700	19 32	21 67	2 35(ST)
	10/20/08 n 01/27/12	01/27/12	22 731	90 0200	80 5700	1,493 13	1,831 39	338 26 (LT)
	10/20/08 n 01/27/12	01/27/12	0 269	99 0200	80 5700	17 66	21 68	4 02 (LT)
	01/06/11 n 01/27/12	01/27/12	2	83 5600	80 5700	417 80	402 84	-14 96 (LT) -
			28 2690			1,947.91	2,277 58	329 67
WELLPOINT INC	12/23/11 n 01/27/12	01/27/12	0 227	67 1900	64 7000	15 25	14 68	-0 57 (ST)
	07/24/09 n 01/27/12	01/27/12	40 773	52 2800	64 7000	2,131 77	2,637 96	506 19 (LT)
	07/24/09 n 01/27/12	01/27/12	0 227	52 2800	64 7000	11 86	14 70	2 84 (LT)
	01/06/11 n	01/27/12	20	59 2600	64 7000	1,185.20	1,293.97	108 77 (LT)
			61 2270			3,344 08	3,961 31	617 23
WELLS FARGO & CO NEW	12/01/11 n 01/27/12	01/27/12	609 0	25 6034	29 3341	15 60	17 86	2 26(ST)
	07/24/09 n 01/27/12	01/27/12	129 391	23 2500	29 3341	3,008 98	3,795 49	786 51 (LT)
	07/24/09 n	01/27/12	609 0	23 2500	29.3341	14 16	17.87	3.71 (LT)
			130 6090			3,038 74	3,831 22	792 48
WORLD FUEL SERVICES CORP	02/04/10 n 01/27/12	01/27/12	81	23 0900	45 4600	1,871 07	3,682 18	1,811 11 (LT)
が大きなが		ALC: NO			76.36.566.97	\$187,566.97	\$208,729,78	\$21,162.81

Stock Funds							
VANGRD MSCI FMG MKTS ETF	03/02/11 n 01/27/12	25 000	46 4800	42 4600	1,162 20	1,061 47	-100 73(ST)
	12/28/11 n 01/27/12	2 000	38 2061	42 4600	267 46	297 22	29 76(ST)
	12/28/11 n 01/27/12	0 825	38 2061	42 4600	31 52	35 04	3 52(ST)
	11/19/10 n 01/27/12	235 000	47 0000	42 4600	11,046 08	9,977 90	-1,068 18 (LT)
	01/06/11 n 01/27/12	70 000	48 2100	42 4600	3,374 70	2,972 14	-402 56 (LT)
		337 825			15,881 96	14,343 77	-1,538 19

page 15 of 17

# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16



REALIZED GAINS/(-)LOSSES continued.								
	Date	Date	, that is	Purchase	Sale	Cost	Sale	Realized
Stock Funds continued	ne linhau	DIOC	Qualitity	FIICe	Frice	Basis	Froceeds	Gain/(-)Loss*
Wildianskip Funds	The second secon	A Charles and the second	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$15,881.96	\$14,343.77	-\$1,538.19
Taxable Bond Funds								
ISHRS INVSTMINT BD FD ETF	10/07/11 n	01/27/12	0 173	111 1500	115 9300	19 22	20 05	. 0 83(ST)
	11/07/11 n 01/27/12	01/27/12	0 161	115 4010	115 9300	18 57	18 66	0 09(ST)
		01/27/12	0 159	112 1635	115 9300	17 88	18 43	0 55(ST)
	01/04/12 c	01/27/12	0 158	113 7500	115 9300	18 02	18 31	0 29(ST)
	06/19/08 n	01/27/12	35 349	101 4400	115 9300	3,585 81	4,097 92	512 11 (LT)
		01/27/12	0 651	101 4400	115 9300	66 03	75 50	9 47 (LT)
	01/06/11 n	01/27/12	10 000	108 4100	115 9300	1,084 10	1,159 27	75 17 (LT)
			46 651			4,809 63	5,408 14	598 51
ISHRS BARCLAYS AGRGT ETF	10/07/11 n 01/27/12	01/27/12	0 094	109 2242	110 4300	10 31	10 38	0 07 (ST)
	11/07/11 n 01/27/12	01/27/12	0 123	110 0000	110 4300	13 50	13 58	0 08(ST)
		01/27/12	0 109	109 2150	110 4300	11 90	12 03	0 13(ST)
		01/27/12	0 105	109 2150	110 4300	11 45	11 59	0 14(ST)
		01/27/12	0 036	109 2150	110 4300	3 95	3 97	0 02(ST)
	01/04/12 c	01/27/12	0 012	110 0700	110 4300	1 32	1 32	0 00(ST)
	06/19/08 n	01/27/12	31 521	99 7600	110 4300	3,144 54	3,480 79	336 25 (LT)
	06/19/08 n 01/27/12	01/27/12	0 479	99 7600	110 4300	47 78	52 93	5 15 (LT)
	01/06/11 n	01/27/12	15 000	105 1400	110 4300	1,577 10	1,656 41	79 31 (LT)
			47 479			4,821 85	5,243 00	421 15
ISHRS BRCLYS TIPS BD ETF	05/18/11 n 01/27/12	01/27/12	42 714	110 4600	118 2700	4,718 48	5,051 69	333 21 (ST)
	05/18/11 n 01/27/12	01/27/12	0 286	110 4600	118 2700	31 59	33 84	2 25(ST)
	10/07/11 n 01/27/12	01/27/12	0 065	114 9378	118 2700	44	2 68	0 24(ST)
	11/07/11 n 01/27/12	01/27/12	0 132	117 6126	118 2700	15 50	1561	0 11 (ST)
	12/07/11 n	01/27/12	680 0	116 7067	118 2700	10 39	10 52	0 13(ST)
			43 286			4,783 40	5,119 34	335 94
ISHKS BRCLY INTER BUIET	10/07/11 n 01/27/12	01/27/12	0 151	105 9623	107 9600	15.99	16 30	031(ST)
	21//2/10 n 11//0/11	21//2/10	91.90	10/ /361	10/ 9600	15 77	15 76	-0 01 (ST)
		01/27/12	0 140	106 2538	107.9600	1484	1511	0.27(ST)
		01/27/12	0 018	106 2538	107 9600	187	1 94	0 07 (ST)
	01/04/12 c	01/27/12	0 137	107 0080	107 9600	14 69	14 79	0 10(ST)
	06/19/08 n	01/27/12	28 408	99 1600	107 9600	2,816 94	3,066 86	249 92 (LT)
	06/19/08 n	01/27/12	0 592	99 1600	107 9600	58 70	63 93	5 23 (LT)
	01/06/11 n	71/17/10	20 000	105 0000	107 9600	2,100 00	2,159.15	59 15 (L1)
			49 592			5,038 80	5,353 84	315 04

# JEWISH FEDERATION OF SIOUX CITY IOWA

# Statement Period JANUARY 1 - JANUARY 31, 2012 Account Number 3122-3530 EM16



	Date Acquired	Date Sold	Quantity	Purchase Price	Sale Pnce	Cost Basis	Sale Proceeds	Realized Gain/(-)Loss*
Taxable Bond Funds continued						519,453.68	\$21,124.32	\$1,670,64

\$21,295.26
2,902,61
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€Total:Realizec

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\$134,163.48
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200
Net Short Net Long
Total
1.7.44.47.77

- Please note "Realized Gaun/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing

  Covered Tax Lot The cost basis, holding period and sale proceeds on this tax lot will be reported by Baird to the IRS for taxable (reportable) accounts

  Noncovered Tax Lot The cost basis and holding period on this tax lot will not be reported by Baird to the IRS. The sale proceeds will be reported to the IRS for taxable (reportable) accounts. Cost information is being supplied for informational purposes only

# INTERESTED PARTIES AND/OR SUPPORTING REPRESENTATIVE(S)

Per your request, a copy of this statement has also been sent to

**DAKOTA DUNES SD 57049-5066** 496 E DEERFIELD CIRCLE **LINDA COHEN** 

SIOUX CITY IA 51104-2219 JAMES ROCKLIN 104 W 34TH

Your Supporting Representative(s) is (are)

ROBERT W BAIRD & CO INC ADVISORY SERVICES

Visit our Web site at www.rwbaurd com Clients enrolled in Baurd OnLine can access updated Account Information, Baird Research and Investing Tools including the latest market information, portfolio tracking and more Please contact your Baird Financial Advisor with questions regarding Baird OnLine, your account or this statement. Thank you for allowing Robert W Baird & Co Incorporated to serve you

# JEWISH FEDERATION OF SIOUX CITY IOWA PIM/DALI

# Statement Period FEBRUARY 1 - FEBRUARY 29, 2012 Account Number 1180-1504 EM16



This section presents estimated realized gains or losses for your information only, and should not be used for tax purposes. To calculate gains or losses, the position with the highest purchase price has been liquidated first unless you have instructed us otherwise. We suggest you review this information for accuracy and contact your Baird Financial Advisor with any questions

	Date	Date		Purchase	Sale	Cost	Sale	Realized
	Acquired	Sold	Quantity	Price	Pnce	Basis	Proceeds	Gain/(-)Loss*
Stock Funds								
ET CNSMR DSCR ALPHA ETF	06/28/11 n 02/17/12	02/17/12	35 000	21 5600	22 1600	754 60	775 58	. 20 98(ST)
ET CNSMR DSCR AI PHA ETF	06/28/11 n 02/29/12	02/29/12	2 000	21 5600	22 2701	107 80	111 34	3 54(ST)
	02/27/12 c 02/29/12	02/29/12	2 000	22 1900	22 2701	110 95	111 35	0 40(ST)
			10 000			218 75	222 69	3 94
ET II HI TH CARE AI PH FTF	01/27/12 c 02/17/12	02/17/12	5 000	28 6267	29 5901	143 14	147 94	4 80(ST)
ET II HI TH CARE ALPH ETF	01/27/12 c 02/24/12	02/24/12	10 000	28 6267	29 9701	286 27	299 69	13 42(ST)
ET II HI TH CARE AI PH ETF	01/27/12 c 02/27/12	02/27/12	5 000	28 6267	29 9401	143 14	149 69	6 55(ST)•
ET II HI TH CARE AI PH ETF	01/27/12 c 02/29/12	02/29/12	5 000	28 6267	30 1301	143 14	150 64	7 50(ST)
ET II 11 AI PHANEX FTF	01/27/12 c 02/29/12	02/29/12	1,650 000	17 5000	17 5938	28,875 00	29,029 23	154 23(ST)
	02/17/12 c 02/29/12	02/29/12	15 000	17 9852	17 5938	269 78	263 90	-5 88(ST)
	02/24/12 c 02/29/12	02/29/12	2 000	17 9299	17 5938	89 65	96 /8	-1 69(ST)
	02/27/12 c 02/29/12	02/29/12	10 000	17 7500	17 5938	177 50	175 95	-1 55(ST)
			1,680 000			29,411 93	29,557 04	145 11
ET DIENTERNET ED ETE	06/28/11 n 02/17/12	02/17/12	25 000	35 6000	35 4001	890 15	884 98	-5 17(ST)
ET D. INTERNET FD ETF	06/28/11 n 02/24/12	02/24/12	5 000	35 6000	35 7201	178 03	178 59	0 56(ST)
ET DIINTERNET ED ETF	06/28/11 n 02/29/12	02/29/12	2 000	35 6000	35 7300	178 03	178 64	0 61 (ST)
Trotal/Stock/Funds: 1955 1955 1955 1955 1955 1955 1955 195	A TOP OF		ないな まるが	Con March Sand		\$32,347.18	\$32,545.48	\$198.30

Preferred Stocks							
RRCLYS LISD INTL CRRY ETN	01/27/12 c 02/24/12	230	46 8600	46 9000	13,589 40	13,600 75	11 35(51)
	02/17/12 c 02/24/12	ഹ	47 1817	46 9000	235 91	234 50	-1 41 (ST)
		295			13,825 31	13,835.25	9 94
Total Preferred, Stocks of the control of the contr	The state of the s		一	The second of th	\$13,825.31	\$13,835.25	\$9.64

Herodo	Ì	<b>-\$2</b> .69 %
	13,773 55	\$13,773.55
	13,776 24	\$13,776.24
	110 1904	Trans 13, 14
	110 2099	大学 1913 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	125 000	
	01/27/12 c 02/17/12	THE PROPERTY OF THE PROPERTY O
Taxable Bond Funds	ISHS BRCLY ST TREA ETF	Total Taxable Bond Funds

··~ \$205.55	\$205.55 \$0.00
\$60,154.28	\$60,154.28 \$0.00
是Lotal Realized Gains/(-) Losses- 第一、公司、公司、公司、公司、公司、公司、公司、公司、公司、公司、公司、公司、公司、	Total Net Short-Term (ST) 5.948.73 Total Net Long-Term, Subject to 15%, Maximum Tax Rate (LT) 15% Tax Rate (LT) 15% Maximum Tax Rate (LT) 15% Tax Rate (LT)

Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing. Covered Tax Lot - The cost basis, holding period and sale proceeds on this tax lot will be reported by Baird to the IRS for taxable (reportable) accounts

Noncovered Tax Lot - The cost basis and holding period on this tax lot will not be reported by Baird to the IRS The sale proceeds will be reported to the IRS for taxable (reportable) accounts. Cost information is being supplied for informational purposes only

# JEWISH FEDERATION OF SIOUX CITY IOWA PIM/DALI



Statement Penod MAY 1 - MAY 31, 2012

Account Number 1180-1504 EM16

# REALIZED GAINS((-)LOSSES

This section presents estimated realized gains or losses for your information only, and should not be used for tax purposes. To calculate gains or losses, the position with the highest purchase price has been liquidated first unless you have instructed us otherwise. We suggest you review this information for accuracy and contact your Baird Financial Advisor with any questions

•								
	Date	Date		Purchase	Sale	Cost	Sale	Realized
	Acquired	Sold	Quantity	Price	Pnce	Basis	Proceeds	Gain/(-)Loss*
Stock Funds	•		<b>.</b>					
FT REIT INDEX FUND ETF	01/27/12 c 05/07/12	05/07/12	95 000	16 4200	17 5900	1,559 90	1,671 00	111 10(ST)
	02/17/12 c 05/07/12	05/07/12	35 000	16 5700	17 5900	579 95	615 63	· 35 68(ST)
	02/24/12 c 05/07/12	05/07/12	10 000	16 5220	17 5900	165 22	175 91	10 69(ST)
			140 000			2,305 07	2,462 54	157 47
FT REIT INDEX FUND ETF	01/27/12 c 05/15/12	05/15/12	214 000	16 4200	17 3401	3,513.88	3,710 69	196 81 (ST)
FT CNSMR DSCR ALPHA ETF	06/28/11 n 05/15/12	05/15/12	146 000	21.5600	21 3701	3,147.76	3,119.96	-27 80(ST)
FT CNSMR STPL ALPHA ETF	02/29/12 c 05/15/12	05/15/12	157 000	24 6600	24 0901	3,871 62	3,782.06	-89 56(ST)
FT II HLTH CARE ALPH ETF	01/27/12 c 05/07/12	05/07/12	20 000	28 6267	30 4501	572 54	86 809	36 44(ST)
FT II HLTH CARE ALPH ETF	01/27/12 c 05/15/12	05/15/12	123 000	28 6267	30 0801	3,521 09	3,699 76	178 67 (ST)
FT DJ INTERNET FD ETF	06/28/11 n 05/07/12	05/07/12	10 000	35 6000	35 8301	356 06	358 29	2 23(ST)
FT DJ INTERNET FD ETF	06/28/11 n 05/15/12	05/15/12	104 000	35 6000	35 4200	3,703 03	3,683 59	-19 44(ST)
Total Stock Funds	,	The state of the state of			* * * * * * * * * * * * * * * * * * *	\$20,991.05	\$21,425.87	\$434.82
Preferred Stocks								
BRCLYS GS CRUDE OIL ETN	02/27/12 c 05/07/12	05/07/12	720	27 5600	24 0800	19,843 20	17,337 20	-2,506 00(ST)
	02/29/12 c 05/07/12	05/07/12	15	27 1674	24 0800	407 51	361 20	-46 31 (ST)

Realized Gains/(-)Losses	- 3	
zed Gains/(-)Losses	41.76	
zed Gains/(-)Losses	\$41,2	
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Total Preferred Stocks

17,698 40

\$0.00 -\$2,117.49 \$39,124.27 \$0.00 \$41,241.76 Total Net Long-Term (ST)

Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing

Noncovered Tax Lot - The cost basis and holding period on this tax lot will not be reported by Baird to the IRS The sale proceeds will be reported to the IRS for taxable (reportable) Covered Tax Lot - The cost basis, holding period and sale proceeds on this tax lot will be reported by Baird to the IRS for taxable (reportable) accounts

accounts Cost information is being supplied for informational purposes only