

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990** 

## **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Department of the Treasury

At calendar year, or tax year beginning  C Name of organization Hand in Hand American Friends for Doing Business As  Number and street (or P.O box if mail is not delivered to street address)  PO Box 80102  City or town, state or country, and ZIP + 4  Portland  Portland  F Name and address of principal officer:  Lee Gordon PO Box 80102, Portland, OR 97280  tatus X 501(c)(3) 501(c) ( )  (insert no) 4947(a)(insert no) 4947(a)(inse	Property of the Center  Room/suite  97280  97280  L Ye  L Ye  2 main citie  We also con ng & training  sed of more th	For Jew D Employer I 93-1269590 E Telephone (503) 892-29 G Gross received H(a) Is this a group return H(b) Are all affiliates incide If "No," attach a list H(c) Group exemption in ar of formation 1999 Ing 2011-2012 HIH vision of Tel Aviv and Hatinued our support of new teachers & builded.	number 962  upts \$ 1,30 m for affiliates? Yes toded? Yes to (see instructions)  umber >  M State of legal domicile  vas engaged in working ifa, as well as carrying of HIH's existing 4 scho	out ools
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PO Box 80102  City or town, state or country, and ZIP + 4  Portland  F Name and address of principal officer:  Lee Gordon PO Box 80102, Portland, OR 97280  tatus  X 501(c)(3) 501(c) ( ) (insert no ) 4947(a)(  www.handinhand12.org  ization  X Corporation  Trust  Association  Other  Summary  refly describe the organization's mission or most significant active eate new 'shared communities' of Jewish and Arab Israelis in the eparatory work for the opening of new integrated schools there eduding increased enrollment, creation of new curriculum, recruit neck this box  If the organization discontinued its operations or dispumber of voting members of the governing body (Part VI, line 1a umber of independent voting members of the governing body (Part VI, line 1a umber of independent voting members of the governing body (Part VI, line 1a)	97280  ) or 527  L Ye  ities: Duri 2 main citie We also con ng & training osed of more th	G Gross received the second of	spts \$ 1,30 m for affiliates? Yes added? Yes added? Yes added? It (see instructions) sumber > M State of legal domicile was engaged in working the second of HIH's existing 4 school ilding community supp	No No OR OR out
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	1) /CD	Prior Year	<del></del>	
ontributions and grants (Part VIII line 1b)	IVED	<del> </del>		97,733
		4		3,750
	2012	<del>Ŋ</del>		19
ther revenue (Part VIII column (A) lines 5. 6d. 94-9c 19-	7 (19 )	<u>k</u>		19
			381 130	01,502
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		1	,550	0.000
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* *******	133,800		120 9	89,524
	 line 25)			
	iiile 20) .	<del></del>	<del>' ' '</del>	84,389
certae less expenses. Gabaget line to nom line 12	· · ·			
otal assets (Part X, line 16)			·	52,065
				5,255
				46,810
		1	15	10,010
	les and stateme	nts, and to the best of my	knowledge	
ue, correct, and complete Declaration of preparer (other than officer) is based on all	information of w	hich preparer has any kino	wiedge	
tee In		415	113	
Signature of officer		Date		
Lee Gordon	Exe	cutive Director		
Type or print name and title				
Print/Type preparer's name Preparer's signature		Date	PTIN	
Kathara Donaldson	wah			_
Total John Dorlandson		4/4/2013   80	п-етроуео 1Р01318306	<u> </u>
		Firm's EIN ▶		
Firm's address ► 1924 SE 35th Ave, Portland, OR 97214			(503) 233-6078	
discuss this return with the preparer shown above? (see instruct	ions)		X Yes	No
	exal number of individuals employed in calendar year 2011 (Part of tal number of volunteers (estimate if necessary).  Interpolated business revenue from Part VIII, column (C), line 1 tet unrelated business taxable income from Form 990-T, line 34.  Interpolated business taxable income from 990	atal number of individuals employed in calendar year 2011 (Part V, line 2a) atal number of volunteers (estimate if necessary).  Interpretated business revenue from Part VIII, column (C), line 12 at unrelated business taxable income from Form 990-T, line 34.  Perturbations and grants (Part VIII, line 1h) are revenue (Part VIII, column (A), lines 3, 4, and IPR 0, 8 2013 atal revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 3, 4, and IPR 0, 8 2013 atal revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1, and similar amounts paid (Part IX, co	total number of individuals employed in calendar year 2011 (Part V, line 2a).  Intal number of volunteers (estimate if necessary).  Intal unrelated business revenue from Part VIII, column (C), line 12.  Intervenue (Part VIII, line 1h).  Intervenue (Part VIII, line 1h).  Intervenue (Part VIII, column (A), lines 3, and (Part VIII, column (A), lines 3, and (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 5, 6d, etc. 9c. 40c. and 11e).  Intervenue (Part VIII, column (A), lines 4).  Intervenue (Part VIII, column (A), lines 4	total number of individuals employed in calendar year 2011 (Part V. line 2a):  5 ctal number of volunteers (estimate if necessary):  total number of volunteers (estimate if necessary):  7a  at unrelated business revenue from Part VIII, column (C), line 12.  7a  at unrelated business taxable income from Form 990-T, line 34.  7b  RECEIVED  Prior Year  Current Year  contributions and grants (Part VIII, line 1h):  Ogram service revenue (Part VIII, line 2g):  Ogram service revenue (Part VIII, column (A), lines 3, line 33, line 34.  It is service revenue (Part VIII, column (A), lines 3, line 31,

04B 007

	90 (2011)	Hand in Hand American Friends for the Center for Jewish-Arab Education	93-1269590	Page 2
Pa	rt lil	Statement of Program Service Accomplishments		<del></del>
		Check if Schedule O contains a response to any question in this Part III		. 🗀
1	Bnefly d	escribe the organization's mission		
		n in Israel.		
2	the prior	organization undertake any significant program services during the year which were not listed Form 990 or 990-EZ?		X No
3	services			X No
4	Describe	describe these changes on Schedule O.  the organization's program service accomplishments for each of its three largest program sets. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to allocations to others, the total expenses, and revenue, if any, for each program service reports.	o report the amount o	
4a	Grants t commun were hir families families inter-fait engaged integrate high sch training hosted a	inities/integrated schools" initiative. Part-time and full time community outreach workers ed in cities of Tel Aviv, Haifa and Jerusalem and they worked to recruit parents and interested in opening new integrated schools. In Tel-Aviv over 150 Jewish and Arab engaged in joint activities including lecture series, Arabic language courses, high holiday celebrations, steering committee for new school and more. In Haifa 50 families in similar joint programs and start up work was carried out for the opening of a new ed Jewish-Arab preschool. (The new school opened in Sept 2012.) In addition, the second gool 12th grade class graduated in June 2012. The first ever national summer teacher conference for ALL of Hand in Hand staff was held. The Hand in Hand school in Jerusalem an official visit by Israeli Minister of Education, speaker of the Israeli parliament and embers of parliament in December 2011.		
4b	(Code		enue \$ n	
		book in Januaries (and Apply and and Javish). The students made 37 presentations in		,
	synagog	ues, mosques, churches, universities, high schools and private homes. Cities included Los	**************	
	Angeles	, San Antonio, Austin, Chicago and New York. Hand in Hand executive director in Israel,		
	Shuli Di	chter, visited the US twice and gave lectures at a conference in Washington DC, in several		
	synagog	ues and at private receptions. Lee Gordon recruited 10 college students to volunteer at		
	Hand in	Hand's summer day camp held in July in Jerusalem. New social media including regular		
		nication via facebook was implemented in the US. This has expanded Hand in Hand's audience		
	the US.	Director Lee Gordon gave 35 presentations in cities that included San Francisco, Seattle,		
	Los Ang	eles, Chicago, New York, Portland and Washington DC, and Wesleyan University.		
		***************************************		
			· · · · · · · · · · · · · · · · · · ·	
4c	(Code:	) (Expenses \$ 15,000 including grants of \$ 15,000 ) (Rev	enue \$	0)
	Grants t	o the Hagar helped the Hagar integrated school in the city of Beersheba continue to grow		
	its progr	am and increase enrollment.		
		••••••		
		*		
	Other	rogram services. (Describe in Schedule O.)		
<b>4</b> d	(Expens		0)	
45		rogram service expenses > 1,007,892		
40	_iousi pi	OBJUSTI SOLVIOS STATES		

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	-	_	
3		2	Х	
_	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
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,"	8		X
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	×	-
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	<b>1</b> 1d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	110		Х
	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	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	146	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140		
	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 located outside the United States? If "Yes," complete Schedule F, Parts III and IV.	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		_	
	If "Yes," complete Schedule G, Part III	19	l	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	

T di	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		143	140
	in the 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, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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			
24-	employees? If "Yes," complete Schedule J	23		_X_
248	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1 .		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del>-^-</del>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			i
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25.		v
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		_X
-0	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 of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	<b> </b>		ļ
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			J
_	Schedule L, Part IV	28b		X
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28¢		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<del>-</del>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	• • • • • • • • • • • • • • • • • • • •			١
33	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		V
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II.	33		X
	III, IV, and V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	Did the organization receive any payment from or engage in any transaction with a controlled entity within			<del></del>
	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			U
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37		<u> </u>
38	19? Note. All Form 990 filers are required to complete Schedule O	38	$ \mathbf{x} $	
	to treatment and our many and required to description described by the contract of the contrac	_	990	(2011)

_	Page (2011). Hand in Hand American Friends for the Center for Jewish-Arab Education  To V Statements Regarding Other IRS Filings and Tax Compliance	93-1269590		Page :
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	7		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		ł
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	ئىنى ا	<u>:</u>	
	gaming (gambling) winnings to prize winners?	· · 1c	_	╀
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1.5		į
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a	4	154	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. <u>2b</u>	X	↓
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	<del>- <u></u> -</del>	ļ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		╄—	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>	┼	┼
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	<b>'</b>		
	over, a financial account in a foreign country (such as a bank account, secunties account, or other financial			
	account)?	· 4a	+-	<u> </u>
þ	If "Yes," enter the name of the foreign country:   See yester for filling requirements for Form TD F 00 22 4. Depart of Foreign Dayle and Filling in the second of the filling requirements for Foreign Dayle and Filling requirements for Foreign Dayle and Filling Region Day			
^ E_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account		┼─	╌
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .		_	┼ <del></del>
Ь	If BY	5c	+	+^
ç 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	.   30	+	+
va	organization solicit any contributions that were not tax deductible?	6a	1	X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	100	+	+^
	gifts were not tax deductible?	6ь	ì	1
7	Organizations that may receive deductible contributions under section 170(c).	· · · ·	<del>                                     </del>	<del> </del>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1
-	and services provided to the payor?	7a	1	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		$\top$
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	1	] x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require	· ·	$oldsymbol{ol}}}}}}}}}}}}}}}}}$	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109	98-C? 7h	↓	<b>↓</b> _
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	1.	1	, 1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	<u> </u>	╁	┦—
_	organization, have excess business holdings at any time during the year?	·   8	↓	—
9	Sponsoring organizations maintaining donor advised funds.	-	╁	-
a	Did the organization make any taxable distributions under section 4966?	<u>9a</u>		┿
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	<u>9ь</u>	╂	┽—
10	Section 501(c)(7) organizations. Enter:	}		1
a	Initiation fees and capital contributions included on Part VIII, line 12	<del></del>		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<del></del>		1
11	Gross income from members or shareholders	ر پيرياد د د د د د		
8	Gross income from other sources (Do not net amounts due or paid to other sources	600		3.4
Ь	against amounts due or received from them.)	i in	`]```	, <b>]</b> (
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128	<u> </u>	1-
128 b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			+
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	
a	Is the organization licensed to issue qualified health plans in more than one state?	138	1	+
•	Note. See the instructions for additional information the organization must report on Schedule O.		7	<del>- </del>
ь	Enter the amount of reserves the organization is required to maintain by the states in which	** **	1	1
-	the organization is licensed to issue qualified health plans		<b>∳</b> .	
	, , , , , , , , , , , , , , , , , , ,			

Did the organization receive any payments for indoor tanning services during the tax year? . . . . If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

	Hand in Hand American Friends for the Center for Jewish-Arab Education 93-126  Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	9590	F	aga 6
l ai	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se	a ™o oo ind	in In ici	ione
	Check if Schedule O contains a response to any question in this Part VI	אווו סכ	HUCE	X
Sect	ion A. Governing Body and Management	<u> </u>		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   7			
	If there are material differences in voting rights among members of the governing body, or	-1,	1	, 1
	if the governing body delegated broad authority to an executive committee or similar		•	
	committee, explain in Schedule O.		,	,
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		_ X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
þ	Each committee with authority to act on behalf of the governing body?	8ъ		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		-	
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode.)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		L
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.			ļ
40		12c		
13	Did the organization have a written whistleblower policy?	13		X
14	· · · · · · · · · · · · · · · · · · ·	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_		450		<del> </del>
a	The organization's CEO, Executive Director, or top management official	15a		X
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		X
46-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
168				
	with a taxable entity during the year?	16a		X
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	(		
	the organization's exempt status with respect to such arrangements?			ļ
<u> </u>	tion C. Disclosure	16b		L
	List the states with which a copy of this Form 990 is required to be filed   OR	<del></del> -		
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c	7(3)~	0000	
	available for public inspection. Indicate how you made these available. Check all that apply.	ッ(つ)ぢ	orny)	
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	•		
	organization: ► Lee Gordon (503) 892-29			
	PO Box 80102, Portland, OR 97280			
			990	

•											
Form 990 (2011)	Hand in Hand American Friends for	or the Center fo	r .lew	ish-	Ara	h F	duca	tion		93-12695	90 Page <b>7</b>
Part VII	Compensation of Officers, Dire										- Page 7
	Employees, and Independent C		,	,			<b>-</b> , •••	, .			
	Check if Schedule O contains a re		oue	stic	ו חכ	n th	is Pa	art \	/11		
Section A.	Officers, Directors, Trustees, Key 8										<u> </u>
	this table for all persons required to be									na with as within	the
organization's		riisted. Nepon (	Julip	C113	auo	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ji Wie	Cai	endar year endi	ing with or within	uie
-	of the organization's current officers,	tirectore truete	ac /w	hati	hori	indr	nidus	le o	r organizations)	renardless of a	mount
of compensat	tion. Enter -0- in columns (D), (E), and	(F) if no compe	os (w liteen	กก v	was	nai	id id	iis U	i Organizations)	, regardless or a	mount
	of the organization's current key empl							finit	ion of "kev emp	lovee."	
	organization's five current highest co										nptoyee)
	reportable compensation (Box 5 of Fo	rm W-2 and/or	Box 7	7 of	For	m 1	099-	MIS	C) of more than	\$100,000 from	the
-	and any related organizations.										
	of the organization's former officers, k								d employees wi	no received more	e than
	eportable compensation from the orga		•		_	-					
	of the organization's former directors										e of the
	more than \$10,000 of reportable comp			_				•	_		
	in the following order: individual trustee		nstitu	rtion	ıal tı	rust	lees;	offic	ærs; key employ	rees; highest	
	l employees; and former such persons										
Check th	is box if neither the organization nor a	ny related organ	izatio	on c	om	pen	sated	an	y current officer	director, or trus	tee
					(6	C)					
	(A)	(B)	(FI) (de and about					ane	(D)	(E)	(F)
	Name and Title	Average	box,	(do not check more than one box, unless person is both an				n an	Reportable	Reportable	Estimated
	:	hours per week	officer and a director/trustee)				compensation from	compensation from related	amount of other		
		(describe	or div	ng t	Officer	ş	돌호	Former	the	organizations	compensation
-		hours for related	director	5	1 2	ş	Highest co	聲	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		organizations	Individual trustee or director	Institutional trustee		етрюуее	Highest compensated employee				and related
		in Schedule O)	Stee	흏		•	¥				organizations
•				&			8	ŀ			
(1) Stuart	Brown		<del>                                     </del>		t		<u> </u>	1			
Chair & Boar	·	4.00	x		x			l	۱ ،	o	0
(2) Paula l			<u> </u>	-	-	<del>                                     </del>	<del> </del>	<del> </del>	<u>-</u>		<u> </u>
Board member		1 00	Х	1	1			l	o	l	o
(3) Julie B	ram										
Board member	er	1.00	Х					<u> </u>	0	o	0
(4) Warrer	n Eisenberg							Π			
Board member		1.00	Х				<u> </u>		0	0	0
(5) Emile 8								l			
Board member		1 00	X	<u> </u>	<u> </u>		ļ	L	0		0
(6) Seth Ja				•			!			]	
Board member		1.00	X	_	<u> </u>	_	<u> </u>	╙	0	0	0
(7) Greg R			l	1			1				
Board member		1.00	X	-	<b>—</b>	-	-		0	0	0
(8) Lee Go			ł				]	l			
Executive Dir		45.00		┞	X	-	-	-	66,250	0	1,242
(9) Patricia		05.00		1			l	l			
	Office Manager	35 00	-	<del> </del>	X	-			35,500	0	680
(10)	••••			1							
(11)			<del> </del>	$\vdash$	<del> </del>	-	╁	-	· · · · · · · · · · · · · · · · · · ·	<del></del>	
32.7											
(12)			<b></b> -	-	<del> </del>	$\vdash$	<del>                                     </del>				
3277				1 .	}	l	1	1			

(13)

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

more than \$100,000 of compensation from the organization

0

Form 9	90 (201	1). Hand in Hand American Friends for the Ce	-Arab Education	n	93-12695	90Page 9	
Par	t VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c	Federated campaigns	5,965 0	, s <sup>2</sup> ,			
Contributions, G and Other Simila	e f	Related organizations 1d Government grants (contributions) 1e All other contributions, grifts, grants, and similar amounts not included above 1f	0 0 1,291,768				12 mm 20 mm
Contrik and Ot	g	Noncash contributions included in lines 1a-1f: \$  Total. Add lines 1a-1f	0	1,297,733			3 ,
			Business Code		`	,	
Program Service Revenue	2a	Honoraria	900099	3,750	3,750		<del></del>
Š	Ь		300033	3,730		<del></del>	<del></del>
8			-				
풀	6			0			
త్త	4			0			
듩	8			0			
₹	f	All other program service revenue		0			
	9	Total. Add lines 2a-2f	🕨	3,750			
	3 4 . 5	Investment income (including dividends, interest, other similar amounts)	►	19 0			19
	ŀ	Royalties	(ii) Personal		-	٠ ,	
	6a	Gross rents		1,	, , , ,	No. 1	Jahar Salah
	ь	Less. rental expenses		•	′ ′		
		•	0			1.	,40, 40, 7
	C					<del></del>	
	. d	Net rental income or (loss) .		0			ļ
		Gross amount from sales of assets other than inventory . 0	(ii) Other			ren i	
		Less. cost or other basis and sales expenses 0	0	,			
	C	Gain or (loss) [ 0	0		<u> </u>		
•	d	Net gain or (loss)	<b>.</b>	0		Section :	, <u>-</u>
Other Revenue	8a	Gross income from fundraising events (not including \$	o	m to the grant for	ay hawar o ara yanta san yanta Cara da	The second of th	the first of the second of the
ž	L	Less: direct expenses b	Ö	·		-	
0		·			學施の意思な	<u> </u>	<u> </u>
		Net income or (loss) from fundraising events Gross income from gaming activities.				75 14 148	Ħ ·
	ь	See Part IV, line 19	0	, , , , , , , , , , , , , , , , , , ,		100 g	-
	c	Net income or (loss) from gaming activities	• • •	0			
	E .	Gross sales of inventory, less returns and allowances	0				The Contract of the Contract o
	Ь	Less: cost of goods sold b	Ö	, , ,	j	1.500	3.
	•	•			ļ	<del></del>	المستنستان
	_ <u>c</u>	Net income or (loss) from sales of inventory .		0		<u> </u>	<del> </del>
	<u> </u>	Miscellaneous Revenue	Business Code			· · · · · · · · · · · · · · · · · · ·	ļ
	11a	***************************************		0			
	ь			0			
	С			0			
	d	All other revenue		0			
	e	Total. Add lines 11a-11d	<b>→</b>	0		,	
	12	Total revenue. See instructions		1,301,502		0	19

## 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).

	of include amounts reported on lines 6b, total exper		(B) Program service expenses	(C) Management and general expenses	(D) Fundrassing expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0		2 N 202	
2	Grants and other assistance to individuals in the				
	United States. See Part IV, line 22	0		· , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				ė
	United States. See Part IV, lines 15 and 16	959,000	959,000	2.33	2 T
4	Benefits paid to or for members	0			<u>'</u>
5	Compensation of current officers, directors,				
	trustees, and key employees	92,422	12,250	24,150	56,02
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	61,400	14,390	3,300	43,710
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	550	55		49:
10	Payroll taxes	13,517	2,298	2,433	8,78
11	Fees for services (non-employees).				
а	Management	0			
b	Legal	0			
C	Accounting	10,118		10,118	
d	Lobbying	0			•
0	Professional fundraising services. See Part IV, line 17	700			70
f	Investment management fees	0			
g	Other	6,191	1,053	1,114	4,024
12	Advertising and promotion	5,000	·		5,000
13	Office expenses	17,749	3,017	3,195	11,53
14	Information technology	2,987	836	296	1,85
15	Royalties	0			
16	Occupancy	5,629	957	1,013	3,65
17	Travel	28,729	4,884	5,171	18,674
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials .	o			
19	Conferences, conventions, and meetings	430	25	308	9
20	Interest	59		59	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	994	169	179	644
23	Insurance	2,624	200	1,661	76:
24	Other expenses. Itemize expenses not covered			,	
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column			2 July 198 198 198	istant and and a
	(A) amount, list line 24e expenses on Schedule O.)				2, 24 g
а	Educational Program expense	6,258	6,258		
b	Organizational Dues	2,500	2,500		
c	Fees & Misc	256		256	
d	1 000 11 11100	0			
9	All other expenses	o		-	· · · · · · · · · · · · · · · · · · ·
25	Total functional expenses. Add lines 1 through 24e .	1,217,113	1,007,892	53,253	155,96
6	Joint costs. Complete this line only if the	1,= 1,1,1,0	. 100. 1002	00,200	100,80
	organization reported in column (B) joint costs				
	from a combined educational campaign and	}	ļ		
	fundraising solicitation. Check here				
	INTERPORT OF THE PROPERTY OF T	ı I			

Part	X Balance Sheet	(A)		(B)
		Beginning of year		End of year
	Cash—non-interest-bearing	161	1	
2		17,910	2	11,179
3	Pledges and grants receivable, net	48,500		140,520
1 4		0	4	0
6	Receivables from current and former officers, directors, trustees, key	,		. ,
	employees, and highest compensated employees. Complete Part II of	۴.		
	Schedule L	·	5	
6	Receivables from other disqualified persons (as defined under section		-	, 1
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
1	employers and sponsoring organizations of section 501(c)(9) voluntary			
超	employees' beneficiary organizations (see instructions)		6	· · · · · · · · · · · · · · · · · · ·
Assets	· · · · · · · · · · · · · · · · · · ·	0	7	0
₹   ¿			8	
		2,520	9	·
10				'
	other basis Complete Part VI of Schedule D 10a 13,957			
	b Less. accumulated depreciation 10b 13,591	1,360	10c	366
11		0		0
12	· · · · · · · · · · · · · · · · · · ·	0	12	0
13	· · · · · · · · · · · · · · · · · · ·	0	13	0
14	· *	0	14	0
11		0	15	0
110		70,451	16	152,065
17		8,030		5,255
18	, , , , , , , , , , , , , , , , , , ,		18	
19	· •		19	<del></del>
20			20	
2	•		21	
2 2	· · · · · · · · · · · · · · · · · · ·	-		
<b>≅</b>	employees, highest compensated employees, and disqualified			
Liabilities	persons. Complete Part II of Schedule L		22	<u> </u>
∄   2:		0	23	0
24		0	24	0
2	· ·			
	parties, and other liabilities not included on lines 17-24) Complete			
- [	Part X of Schedule D	0	25	0
26	Total liabilities. Add lines 17 through 25	8,030	26	5,255
	Organizations that follow SFAS 117, check here ►X and	,		,
8	complete lines 27 through 29, and lines 33 and 34.	*	*	,
E 2	•	13,921	27	6,290
B 20		48,500	_	140,520
P 29			29	140,020
_5 °`	(	• .		
<u> </u>	Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.	(-)		
ير او	·			· · · · · · · · · · · · · · · · · · ·
\$ 30			30	
8 3			31	
Net Assets or Fund Balances			32	<u> </u>
•		62,421		146,810
34	Total liabilities and net assets/fund balances	70,451	34	152,065

Form 990 (2011)

					,	
	990 (2011). Hand in Hand American Friends for the Center for Jewish-Arab Education	9	3-126959	90	Peg	e 12
Par	Reconciliation of Net Assets  Check if Schedule O contains a response to any question in this Part XI		·	·	. [	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1.	301	.502
2	Total expenses (must equal Part IX, column (A), line 25)	2				113
3	Revenue less expenses. Subtract line 2 from line 1	3				389
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				421
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
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			146	810
Part					[	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	_	- [		'es	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	а		Х
b	Were the organization's financial statements audited by an independent accountant?		. 2	b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2	<u>c  </u>		х
	If the organization changed either its oversight process or selection process during the tax year, explain a Schedule O.	1			1	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?		. 3	a L		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1	1	4	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3			
			Fo	m 9	90 (	2011)

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

# **Public Charity Status and Public Support**

20**11** 

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

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2011

04B.007

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ.

(HTA)

► Attach to Form 990 or Form 990-EZ.

►See separate instructions.

	organization							Employe	r identificat		er	
			Center for Jewish-Ar				40	<u> </u>		269590		
Part I			arity Status (All orgation because it is: (Fo						struction	1S.		
1 J			rches, or association (						3			
2			on 170(b)(1)(A)(ii). (Ai			CG 111 ODE	2011 11 0	( <b>-</b> )(•)(~)(•	·,·			
3 🖂			nospital service organi		•	eaction	470/K\/4\	/A\/iii\				
$\overrightarrow{A}$			ation operated in conju						/b\/4\/A\	/iii\ End	or tha	
· _		me, city, and st										
5			r the benefit of a colleg (Complete Part II.)	ge or univ	ersity owr	ned or op	erated by	a gove <sub>,</sub> m	mental u	nit desci	ibed	
6	A federal, sta	ate, or local gov	emment or governme	ntal unit d	lescribed i	in sectio	n 170(b)(	1)(A)(v).				
7 X			y receives a substanti (1)(A)(vi). (Complete I		its suppor	t from a (	governme	ntal unit d	or from th	e gener	al pub	lic
8			in section 170(b)(1)		omplete f	Part II )						
9			ly receives: (1) more th		-	· ·	om contril	butions, n	nemberst	ip fees,	and g	ross
	receipts from	n activities relate	ed to its exempt function	onssub	ject to cer	tain exce	ptions, an	d (2) no r	nore thar	33 1/3	% of it	
			ent income and unrelate after June 30, 1975						(ax) from	busines	ses	
10		_	nd operated exclusive		•		•	•	4).			
11	An organizat	tion organized a	nd operated exclusive	ly for the	benefit of	, to perfo	rm the fur	ctions of,	or to car	ry out th	e	
		-	blicly supported organ					•			secti	on
-			at describes the type of	of support	ing organi	zation an	d comple	te lines 1				
	а 💹 Туре	<del></del>	Type II c		e III-Func	-	•			″уре II⊢		
e []			y that the organization									
			on managers and othe	er than on	e or more	publicly	supported	l organiza	itions des	cribed i	n sect	ion
£		section 509(a)(i	•	a feara the	LIDO shas	dua a Tur	I T	II. aa Tua	- 111	:		
•		, check this box	a written determination		ino uiai	itis a typ	је і, туре	ii, or Typ	e iii supt	orung		
9	•	•	the organization acce		gift or con	tribution	from any	of the	•			` Ш
	following per	rsons?	_	-	-		-					
			or indirectly controls,				persons				Yes	No
			verning body of the su person described in (i		-				• • •	11g(i)		
		-	ly of a person describe	•						11g(ii) 11g(iii)		
<u>h</u>			ation about the support						• •	C. Almin		L
` '	of supported	(II) EIN	(iii) Type of organization	1	organization		ou notify	(vi)	s the	(vii)	Amoun	t of
orga	notation		(described on lines 1-9 above or IRC section		sted in your document?	_	nization in of your		tion in col zed in the		support	
			(see instructions))	governang		sup	port?		S 7	]		
				Yes	No	Yes	No	Yes	No	ļ		
(A)		<u> </u>								}		_
(B)	. <del>-</del>								-			0
												0
(C)												0
(D)												
(E)										<del> </del>		0
	<del></del>			<del> </del>			<u> </u>					0
Total				1	1		1	1				0

School	ule A (Form 990 or 990-EZ) 2011 Hand in Hand A		la for the Cook		water the second		,
Par		ons Describe	ed in Section	er for Jewish-A	A)(iv) and 17	93-126959 (0(b)(1)(A)(vi)	O Page 2
	(Complete only if you checked the	box on line 5,	7, or 8 of Pa	rt I or if the o	rganization fa	iled to qualify	under
	Part III. If the organization fails to q	ualify under the	ne tests listed	below, pleas	se complete F	Part III.)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and	l					
	membership fees received. (Do not	[				1	
	include any "unusual grants.")	977,982	715,489	848,877	1,398,363	1,297,733	5,238,444
2	Tax revenues levied for the organization's		ļ				
	benefit and either paid to or expended on its behalf						. 0
3	The value of services or facilities	T					
	furnished by a governmental unit to the					ļ	
	organization without charge						0
4	Total. Add lines 1 through 3	977,982	715,489	848,877	1,398,363	1,297,733	5,238,444
5	The portion of total contributions by each		,				
	person (other than a governmental unit	, ' ,	•			. ,	
	or publicly supported organization)	-	* •	,,	, , ,		
	of the amount shown on line 11,				, ,		
	column (f)						4 505 707
6	Public support. Subtract line 5 from line 4.						1,525,737 3,712,707
	ion B. Total Support	······································				- <u>L</u>	3,712,707
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	977,982	715,489	848,877	1,398,363	1,297,733	5,238,444
8	Gross income from interest, dividends,	377,302	7 10,400	0-0,077	1,390,303	1,297,733	5,236,444
_	payments received on securities loans,						-
	rents, royalties and income from similar						
	sources	1,815	217	43	18	19	2,112
9	Net income from unrelated business						
	activities, whether or not the business is		1				
	regularly carried on						0
10	Other income. Do not include gain or	i	į				
	loss from the sale of capital assets		i		ì	ì	
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10		1				5,240,556
12 13	Gross receipts from related activities, etc. (se			a a a a a a a a a a a a a a a a a a a		12	3,750
13	First five years. If the Form 990 is for the organization, check this box and stop here						
Page			<del></del>	<del></del>	· · · · ·		· · · •
38CI	ion C. Computation of Public Support I Public support percentage for 2011 (line 6, or		d bulling 44			44	
15	Public support percentage from 2010 Schedu					15	70.85%
16a	33 1/3% support test—2011. If the organizar	tion did not che	ck the box on	line 13 and lii		% or more, cho	80.33%
	and stop here. The organization qualifies as	a publicly supr	ported organiz	ation	14 13 33 173	70 Of Hibre, Cite	<b>.</b>
b	33 1/3% support test-2010. If the organiza	tion did not che	eck a box on li	ne 13 or 16a. a	and line 15 is 3	3 1/3% or more	check this
	box and stop here. The organization qualifie	s as a publicly	supported org	anization			·
17a	10%-facts-and-circumstances test—2011.	· · · · · · · · ·	•				<del>-</del> اـــا
	is 10% or more, and if the organization meets	s the "facts-and	l-circumstance	es" test, check	this box and a	top here. Exals	in in
	Part IV how the organization meets the "facts	-and-circumsta	ances" test. Th	ne organization	qualifies as a	publicly suppor	ted
	organization						
þ	10%-facts-and-circumstances test—2010.	If the organization	tion did not ch	eck a box on li	ne 13, 16a, 16	b, or 17a, and I	ine
	15 is 10% or more, and if the organization me	eets the "facts-	and-circumsta	nces" test, che	eck this box an	d stop here. E	xplain ın

Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

instructions.

Schedule A (Form 990 or 990-EZ) 2011

Sched	ule A (Form 990 or 990-EZ) 2011 Hand in Hand A	merican Frienc	s for the Cente	er for Jewish-A	ab Education	93-126959	0 Page <b>3</b>
Par	Support Schedule for Organizati	ons Describ	ed in Section	509(a)(2)			
	(Complete only if you checked the	box on line 9	of Part I or if	the organizati	on failed to qu	ualify under P	art II
	If the organization fails to qualify ur	ider the tests	listed below,	please compl	ete Part II.)		
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge .						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	·			i		0
b,	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
_	amount on line 13 for the year	0	0	0	0	0	0
8 8	Add lines 7a and 7b	,0		U.			0
Sec	tion B. Total Support			<del></del>		— <u>-</u>	-
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	0	o	o	0	0	0
10a	Gross income from interest, dividends,						<u>-</u>
	payments received on secunties loans,						
	rents, royalties and income from similar sources						0
Þ	Unrelated business taxable income (less	,					
	section 511 taxes) from businesses acquired after June 30, 1975						0
c	Add lines 10a and 10b	0	0	0	0	0	<u>0</u>
11	Net income from unrelated business activities not included in line 10b, whether					J	<del></del>
12	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.)					-	0
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organiza		nd, third, fourth,				▶ □
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2011 (line 8, column	(f) divided by lin				15	0.00%
16	Public support percentage from 2010 Schedule A,					16	0 00%
	tion D. Computation of Investment Inco Investment income percentage for 2011 (line 10c,			ımn (f)		17	0.000/
17 18	Investment income percentage for 2011 (line 10c, or investment income percentage from 2010 Schedul		-			18	0.00% 0.00%
	33 1/3% support tests—2011. If the organization of						0.0076

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Ferm Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See
	instructions).
	•••••••••••••••••••••••••••••••••••••••
	·
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••••	
	•••••••••••••••••••••••••••••••••••••••
	•

#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

(HTA)

**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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Hand in Hand American Friends for the Center for Jewish-Arab Education 93-1269590 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . 2 Aggregate contributions to (during year) Aggregate grants from (dunng year) . . Aggregate value at end of year . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?. 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 conferring impermissible private benefit? . . . . Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 historically important land area Protection of natural habitat Preservation of a certified 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 easement on the last day of the tax year. 2a Total number of conservation easements. ь Total acreage restricted by conservation easements. 2b č Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization dunng the tax year 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? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part 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 treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2011

Using the organization acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):	Sched	fule D (Form 990) 2011	and nemas for the	Center IO	JCMISH-P	ilan Educatit	)II 83-	1209390			Dags 2
3. Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply):  a	Par	t III Organizations Maintaining	Collections of A	rt. Histor	ical Tre	asures, or (	Other :	Similar Assets	Contin	ued)	Page 2
use of its collection items (check all that apply): a	3									333/	
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No IV. Inte 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If Yes," explain the arrangement in Part XIV and complete the following table:  C Beginning balance d Additions during the year. 1 Ending balance 1 Distributions during the year. 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  1a Beginning of year balance. 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization and the arrangement in Part XIV  Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  2 Do Contributions 3 De Contributions 4 Describe in Part XIV and the current year end balance (in 19 no part IV, line 10  2 Provide the estimated percentage of the current year end balance (ine 1g, column (a)) held as: 3 Board designated or quasi-endowment 9 No Part X, line 21.  2 Provide the estimated percentage of the current year end balance (ine 1g, column (a)) held as: 3 Board designated or quasi-endowment 9 No Part X, line 10.  2 Provide the estimated percentage of the organizations is the organizatio					•	•					
C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parx XV. 5 During the year, did the organization solicit or receive donations of art, historical freasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	a	Public exhibition		d 🗌	Loan	or exchange	progra	ms			
C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parx XV. 5 During the year, did the organization solicit or receive donations of art, historical freasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	ь	Scholarly research		e 🗀	Other						
Part XV.    Part XV.   Escrow and Custodial Arrangements. Complete (the organization's collections and explain how they further the organization's exempt purpose in Part XV.   Part XV.   Escrow and Custodial Arrangements. Complete (the organization answered "Yes" to Form 990, Part XV.   Init 9, or reported an amount on Form 990, Part X, line 21.   Is the organization an egent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Yes — No.   Yes — N	c		one		,		••••				
Part XIV  Source the sold to raise funds rether than to be maintained as part of the organization's collection?	A	<del></del>		nd avalain	how they	firther the e	monit	ation's avamet s		_	
sasets to be sold to raise funds rather than to be maintained as part of the organization's collection?	•		on a conections at	in exhiain	now they		nganiza	adon a exempt p	uipose i	11	
sasets to be sold to raise funds rather than to be maintained as part of the organization's collection?	5	Dunng the year, did the organization s	solicit or receive do	onations o	fart histe	nrical treasur	es ora	other similar			
Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an agent, tustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    If "Yes," explain the arrangement in Part XIV and complete the following table:   Amount   It   It   It   It   It   It   It	•								☐ Y	ев 🗀	No
IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If Yes,* explain the arrangement in Part XIV and complete the following table:    Complete the following table:	Part										
Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  If Yes, "explain the arrangement in Part XIV and complete the following table:    Amount			-	•	_		reica	103 10101111	550, 1 6		
included on Form 990, Part X?  If Yes, explain the arrangement in Part XIV and complete the following table:  Beginning balance.  C Beginning balance.  1 c	1a						other	assets not			
b If "Yes," explain the arrangement in Part XIV and complete the following table:    Amount	· –				-				□ Y	es 🗀	No
C Beginning balance.  d Additions during the year.  e Distributions during the year.  f Ending balance.  2a Did the organization include an amount on Form 990, Part X, line 21?  If Yes, "explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  Beginning of year balance.  (a) Current year (b) Prox year back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (e) Four years ba	b									ت	
d Additions during the year			•						Amount		
Ending balance.    Tending balance   Tending bal	C	Beginning balance					10	c			
f Ending balance.  Did the organization include an amount on Form 990, Part X, line 217.  Did the organization include an amount on Form 990, Part X, line 217.  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  Beginning of year balance.  Contributions.  Net investment earnings, gains, and losses.  Grants or scholarships.  Cother expenditures for facilities and programs.  Administrative expenses.  End of year balance.  Demanded the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  Permanent endowment  Permanent endowment  The percentages in lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by If "Yes" to 3a(i), are the related organizations.  (ii) related organizations.  (iii) related organizations.  (iii) related organizations.  Description of property  (a) Cost or other basis (other)  Description of property  (b) Prov year.  (c) Two years back.  (d) Three years back.  (e) Four years back.  (e) Prov years back.  (e) Four years back.  (e) Fou	d	Additions during the year					10	đ			
Did the organization include an amount on Form 990, Part X, line 217.	8	Distributions during the year					19	Э			
b if "Yes," explain the arrangement in Part XIV  Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Reginning of year balance   (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four yea	f	Ending balance						f			0
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    A Beginning of year balance   (a) Current year   (b) Pror year   (c) Two years back   (d) Three years back   (e) Four years back	2a	Did the organization include an amount	nt on Form 990, P	art X, line	21?		. ,		_	es X	No
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (e) Fou	b_										
Beginning of year balance . Contributions . Co	Part	V Endowment Funds. Comple	ete if the organiz	ation ans	wered "\	es" to Form	1 990,	Part IV, line 10	)		
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment Permanent endowment Permanent endowment No c Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property (a) Cost or other beas (b) Cost or other balas (other) depreciation  1a Land 0			(a) Current year	(b) Pn	or year	(c) Two years	back	(d) Three years bac	k (e) F	our years	back
c Net investment earnings, gains, and losses .  d Grants or scholarships . e Other expenditures for facilities and programs . f Administrative expenses . g End of year balance	1a	Beginning of year balance									
and losses d Grants or scholarships e Other expenditures for facilities and programs.  f Administrative expenses g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  Permanent endowment  Method Temporarily restricted endowment  The percentages in lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (cither)  b Buildings  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	b							,	```i		]
d Grants or scholarships . e Other expenditures for facilities and programs . f Administrative expenses . g End of year balance	C	Net investment earnings, gains,		1			1		1923		.
e Other expenditures for facilities and programs.  f Administrative expenses. g End of year balance								· · · · · · · · · · · · · · · · · · ·	<u>'</u>	<u></u>	
and programs .  f Administrative expenses .  g End of year balance .  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment  %  b Permanent endowment  %  c Temporarity restricted endowment  %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations .  (ii) related organizations .  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? .  2 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation depreciation depreciation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	_	· • • • • • • • • • • • • • • • • • • •		ļ			1				
f Administrative expenses	e	-		Ì		ľ	- 1		1 7:	1 1 %	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  %  Permanent endowment  %  Temporarity restricted endowment  %  The percentages in lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	•	· -	· · · · · · · · · · · · · · · · · · ·					<del></del>			
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  %  Permanent endowment  %  The percentages in lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	-	· · · · · · · · · · · · · · · · · · ·		<del> </del>						<del></del>	
Board designated or quasi-endowment b Permanent endowment									<u>u</u>		
b Permanent endowment	_				(mic ig,	Column (a)) i	ielu as	<b>).</b>			
Temporarity restricted endowment	_	,		/4							
The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	C	****									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	_	100000000000000000000000000000000000000									
(ii) unrelated organizations	3a										
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  1a Land  0 0 0 0 0  b Buildings  0 0 0 0 0  c Leasehold improvements  0 0 13,957 13,591 366  e Other  0 0 0 0		organization by:		_						Yes	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		(i) unrelated organizations							3a(i)		
4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (other)  (investment)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  0  0  0  0  0  0  0  0  0  0  0  0  0									3a(il)		
Part VI   Land, Buildings, and Equipment. See Form 990, Part X, line 10.   Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation	þ								3b		
Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation   (d) Book value	4										
(investment)         basis (other)         depreciation           1a Land         0         0         0           b Buildings         0         0         0         0           c Leasehold improvements         0         0         0         0           d Equipment         0         13,957         13,591         366           e Other         0         0         0         0	Part	VI Land, Buildings, and Equip			rt X, line	10.			<u> </u>		
1a     Land     0     0     0       b     Buildings     0     0     0     0       c     Leasehold improvements     0     0     0     0       d     Equipment     0     13,957     13,591     366       e     Other     0     0     0     0		Description of property							(d) B	ook valu	е
b         Buildings         0         0         0         0           c         Leasehold improvements         0         0         0         0         0           d         Equipment         0         13,957         13,591         366           e         Other         0         0         0         0		<del></del>			pasi			repreciation			
c         Leasehold improvements         0         0         0         0           d         Equipment         0         13,957         13,591         366           e         Other         0         0         0         0	_		· · · · · · · · · · · · · · · · · · ·								
d     Equipment     0     13,957     13,591     366       e     Other     0     0     0     0					-						
e Other	_	•									
		• •	<del></del>								
		I. Add lines 1a through 1e (Column (d)	must equal Form		X colum		(c) )				<u> </u>

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

Yotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Hand in Hand American Friends for the Center for Jewish-Arab Education

93-1269590

	200 (10111 000) 2011				Page <b>4</b>
Par	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial	Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	<u> </u>	1	<del></del>	1,301,502
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,217,113
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		84,389
4	Net unrealized gains (losses) on investments		4		0.1,000
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net) Add lines 4 through 8		9		0
10	Excess or (deficit) for the year per audited financial statements. Combine lines		10		
Par					84,389
					4.004.500
1	• • • • • • • • • • • • • • • • • • • •				1,301,502
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	. 1	i		
a	Net unrealized gains on investments	2a		1	
þ	Donated services and use of facilities	2b		İ	
C	. , ,	_2c		1	
đ	Other (Describe in Part XIV.)			_	
0	Add lines 2a through 2d		20	•	0
3	Subtract line 2e from line 1		3		1,301,502
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
C	Add lines 4a and 4b		. 4	; ]	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5		1,301,502
Par	XIII Reconciliation of Expenses per Audited Financial Stateme		s per F	eturn	
1	Total expenses and losses per audited financial statements		1		1,217,113
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		<del> '</del>	<del></del>	1,217,113
	Donated services and use of facilities	2a	1	İ	
8	Prior year adjustments	2b		l	
b	· · · · · · · · · · · · · · · · · · ·	2c		- [	
С	Other losses			İ	
d	·	2d			_
₽	Add lines 2a through 2d		20		0
3	Subtract line 2e from line 1	· · · · · · · · ·	3		1,217,113
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		l		
a	Investment expenses not included on Form 990, Part VIII, line 7b	_4a		1	
b	Other (Describe in Part XIV.)	4b		_	
C	Add lines 4a and 4b		. 4	2	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u>)</u>	5		1,217,113
Par	XIV Supplemental Information				
_	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa	ort III lines 1a and 4	Part IV	lines 11	<u> </u>
	tb; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Par				
		I XIII, lines 20 and 41	). Also (	complete	•
unis p	art to provide any additional information.				
Part	CLine 2 FIN 48 FOOTNOTE. Uncertain Tax Positions. The Company is not awa	re of any			
Latt	Cind 2 1 114 40 1 00 1140 1 E. Oncertain 1 ax 1 0 silons, The Company 15 flot awa	ie oraliy			
unce	tain tax positions. If there were any uncertain tax positions, the Company would				
acco	unt for them using the provision of ASC 740. The tax years subject to audit are 2	:009			
2010	, 2011 & 2012				
				<b>-</b>	
• - • <del>-</del> •		•••••			

Sahadula D (Earn	Hand in Hand American Friends for the Center for Jewish-Arab Education 93-126959	
Schedule D (Form		Page 5
Part XIV	Supplemental Information (continued)	<del></del>
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# Schedule F. (Form 990)

### **Statement of Activities Outside the United States**

2011

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► See separate Instructions.

Open to Public Inspection

Name of the organization
Hand in Hand American Friends for the Center for Jewish-Arab Education

Employer Identification number

Part I General Information on Activities Outside the United States. Complete if the organization answered
"Yes" to Form 990, Part IV, line 14b.

1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other	
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award	
	the grants or assistance?	] No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

► Attach to Form 990.

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	can be duplicated if addition  (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Middle East and North (1) Africa	0	0	grants to recipients in region	r	959,000
Middle East and North (2) Africa	0	1	program service	summer camp	6,258
(3)	0				(
(4)	0	0			
(5)	0	0			(
(6)	0	0			(
(7)	0	0			
(8)	0	0			(
(9)	О	0			(
(10)	o	0			
(11)	0	0			
(12)	0	0			(
(13)	0	0			(
(14)	0	0			(
(15)	0	0			
(16)	0	0			(
(17) 3a Sub-total	0	0			
b Total from continuation	0	1	<del></del>	<del> </del>	965,258
sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	1	-		965,258

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

(HTA)

Schedule F (Form 990) 2011

04B.007

Hand in Hand American Friends for the Center for Jewish-Arab Education Schedule F (Form 980) 2011

Part II

Grants and Other Assistance to Organizations or Entitles Outside the United States. Complete if the organization answered "Yes" to Form 990 Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.

	Part II C	an be duplicat	Part II can be duplicated if additional space is	e is needed.					
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisat, other)
€	#100 Ca 730 M		Middle East and North Africa	community outreach & school support	944,000	944,000 wire transfer	0		
(2)			Middle East and North Africa	school support	15,000	15,000 wire transfer	0		
3	A STATE OF THE STA	は、一般の一般の一般の一個の一個の一個の一個の一個の一個の一個の一個の一個の一個の一個の一個の一個の			0		0		
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<b>®</b>		12 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15			0		0		
(6)	))				0		0		
(10)	)				0		0		
(11)					0		0		
(12)		,			0		0		
(13)		·			0		0		
(14)	•				0		0		
(15)					0		0		
(16)		·			0		0		

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities

Schedule F (Form 990) 2011

Hand in Hand American Friends for the Center for Jewish-Arab Education

6 16 B 0 0 7 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement 0 0 (d) Amount of cash grant (c) Number of recipients Part III can be duplicated if additional space is needed. (b) Region (a) Type of grant or assistance Part III 9 9 **9** 8 9 9 5 目 Ę 2 ම (12) 13 14 15 9 (17)

Schedule F (Form 990) 2011

Schedu	tle F (Form 990) 2011 Hand in Hand American Friends for the Center for Jewish-Arab Education	93-126	9590	Page 4
Part	V Foreign Forms			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No	
6	Did the organization have any operations in or related to any boycotting countnes during the tax year? If			

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2011

X No

Yes

Part V Supplemental Information	Page 3
Supplemental Information  Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this paprovide any additional information (see instructions).	
Part I Line 2 Hand in Hand is a "Friends of" organization for the Center for Jewish-Arab	
Education in Israel. HIH requires the Israel Center to submit quarterly reports on the use	· • • • •
of all grant funds (a general report for general support, or a more detailed report on the	
project of for project support). Included in this is an evaluation of the success and	
impact of programs and projects	· <b></b>
Part I Line 2 In addition the Executive Director of Hand in Hand has regular phone calls	
with the staff in Israel, including weekly or bi-weekly calls with the Executive Director	
in Israel; and reviews print and online articles about the schools.	. <b></b> .
	. <b></b> .
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#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection Employer Identification number

Hand in Hand American Friends for the Center for Jewish-Arab Education	93-1269590
Form 990 Part VI Section B Line 11b 990 REVIEW PROCESS. The Executive Director and the	<u> </u>
Secretary review the draft with the preparer. The final draft is emailed to the entire board	
for review before filing.	
Form 990 Part VI Section C Line 19 DISCLOSURE. Financial statements are available upon	
request Requests for other documents are considered on a case-by-case basis	
•••••	
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ame of the organization	Employer identification number
land in Hand American Friends for the Center for Jewish-Arab Education	93-1269590
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	Schedule O (Form 990 or 990-EZ) (2011)
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