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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

2012



	Α .	For the 20	012 calen	dar year, or tax	year begin	ning		, 20	12, and endir	ıg		,			
	В	Check if app	licable	C				**			D Employer Iden	tification Number			
		Address	change	NEFESH B'	NEFESH .	TEWTSH :	SOULS UN	TTED	TNC		22-3804	1152			
		Name c	•	50 EISENH			OCCED ON	1100,	TIVE		E Telephone num				
		\vdash	•	PARAMUS,							(201) 291-1060				
		Initial re		,							(201) 2	31-1000			
		Termina	ated												
		Amende	ed return		_						G Gross receipts	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		Applica	lion pending	F Name and add	ress of principal	officer				` ′	a group return for af	⊢''' ⊢'''			
			_	,						H(b) Are all	affiliates included? attach a list (see in	structions) Yes No			
	I	Tax-exem	pt status	X 501(c)(3)	501(c) () ▼ (ι	nsert no)	4947(a)(1	1) or 527			,			
	J	Website	≥: ► WW	w.nefeshb	nefesh.c	org				H(c) Group	exemption number	>			
	ĸ	Form of o	ganization	X Corporation	Trust	Association	Other ►		L Year of Forma	tion 200	1 M State of	legal domicile NJ			
	Pa	nil S	Summar	У					·						
		1 Brie	fly descri	be the organiza	ition's missi	on or most	significant a	ctivities	TO STUDY	, ENCO	URAGE, ST	IMULATE AND			
	اره	PR	OMOTE	THE JEWIS	H RELIG	COUS_IDE	EALS OF					TRALITY OF			
	CUI4 & Governance	TH		OF ISRAE						 -					
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Ž	5 8	2 Che	ck this bo						disposed of m	ore than 2	5% of its net a	ssets			
2	75	3 Nur		oting members							3	6			
, 6	ာ လူ	4 Nur		dependent voti	_	_			•		4	<u>5</u>			
-	Ŧ ij			of individuals		-	ear 2012 (Pa	art V, line	e 2a)		5	5 5 8			
2	₹			r of volunteers o ed business rev	-		dumn (C) lu	no 12			6 7a	8			
<u> </u>	Activities &			d business taxa							7 a	0.			
		D Net	unielatet	Dusiness taxa	Die income	HOIN LOITH	330-1, line 3	'			rior Year	Current Year			
	j	8 Cor	atributions	and grants (Pa		5,168,081.	19,891,269.								
SCANNED	Revenue			vice revenue (P						10	582,349.	524,081.			
5	en/		_	ncome (Part VII			4 and 7d)			ļ	302,343.	324,001.			
₹	Re			ie (Part VIII, co				nd 11e)			328,358.				
Ç				e – add lines 8					() line 12)	1-	7,078,788.	20,415,350.			
0,	' —			ımılar amounts							3,200,104.	2,724,838.			
				I to or for mem							7,200,104.	2,724,030.			
₽		15 Salaries, other compensation, employee benefits (Rart/IX/Column?(A), lines 5-10) 5,028,939 5,46													
R	es	16 a Dro	foccional	0,020,939.	5,460,061.										
b	Expenses			fundraising fee			veva Silena i	MASS AND AND	Transfer of						
₩	х			sing expenses											
44				ses (Part IX, co							7,378,207.	7,673,643.			
黑				es Add lines 1				A), line 2!	5)		5,607,250.	15,858,542.			
π			enue less	s expenses Su	btract line 1	8 from line	12				L,471,538.	4,556,808.			
础	ts o			_							ng of Current Year				
坔	Bale			(Part X, line 16	•						L,703,106.	2,089,252.			
#	Net Assets Fund Balan	21 Tot	al liabilitie	es (Part X, line	26)					10	0 <u>,877,040.</u>	4,099,290.			
SCANNED DEC 1 8 2013	Zζ	22 Net	assets o	r fund balances	Subtract II	ne 21 from	line 20				9,173,934.	-2,010,038.			
O	Pa	部间的	Signatu	re Block											
	Unde	er penalties o	f perjury, I d	eclare that I have ex	a nined this retu	urn, including a	ccompanying sch	nedules and	statements, and to	the best of n	ny knowledge and be	elief, it is true, correct, and			
	com	olete Deciali	I. Line	er (other than the	artus based on	all illionnation	or writer prepare	- nas any ki				·			
				776.7	\sim						Nov 5	2013			
	Sign Signature of Officer										ate				
	Here TONY GELBART Type or print name and title								·	Pres	ident				
					; 	16			- Ta		 	PTIN			
				preparer's name		Preparer's sign	-		Date		Check if	İ			
	Pa		Jeff 1	Melamed		Jeff M	elamed		Nov.	2013	self-employed	P01074560			
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	Us	e Only	Firm's addr				rk Bldg	1	· · · · · · · · · · · · · · · · · · ·		Firm's EIN ► 98				
					alem, I						Phone no 972	2-2-679-6606			
	May	the IRS	discuss th	nis return with t	he preparer	shown abo	ve ⁹ (see ins	tructions)			X Yes No			
	-	A Far Da	nonvorle E	Reduction Act I	latica can t		- i			EA01131 13	V10/10	Form 990 (2012)			

	1990 (2012) NEFESH B'NEFESH JEWISH SOULS UNITED, INC	22-38	0415	52	Р	age 2
Par	t.III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					
1	Briefly describe the organization's mission		_			
•	TO STUDY, ENCOURAGE, STIMULATE AND PROMOTE THE JEWISH RELIGIOUS	IDEALS	OF I	HE R	ETU:	RN
	TO ZION AND THE CENTRALITY OF THE LAND OF ISRAEL IN THE JEWISH C	ULTURE.			<u>-</u> -	
		2=-3				
	Did the organization undertake any significant program services during the year which were not listed on the pri	or				
	Form 990 or 990-EZ?	01		Yes	[v]	No
	If 'Yes,' describe these new services on Schedule O		Ш	163	Δ	NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rr 400c2		Vac	X	Ma
•	If 'Yes,' describe these changes on Schedule O	ii vices,	LJ	Yes	V	No
4	Describe the organization's program service accomplishments for each of its three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each program service reported	vices, as m f grants and	easure I alloca	ed by e itions to	xpens	ses
4 a	a (Code) (Expenses \$14,034,610. including grants of \$2,724,838.) (Fig. 2)	Revenue :	\$ 2	0,415	5,35	50.)
	NEFESH B'NEFESH JEWISH SOULS UNITED (NBN) ASSISTS INDIVIDUALS AN					
	EMIGRATION (ALIYAH) TO ISRAEL. NBN PROVIDES FINANCIAL AND/OR SO	CIAL SE	RVIC	ES_		
	ASSISTANCE TO ASSIST THE IMMIGRANTS (OLIM) FIND EMPLOYMENT, HOUS					
	LEARN THE HEBREW LANGUAGE, ALL OF WHICH ARE NEEDED TO SUCCESSFUL	LY INTE	GRAT	E TH	E O	$\overline{\text{LIM}}^-$
	INTO ISRAELI SOCIETY.	 -				
		 -				
11	(Code) (Expenses \$ including grants of \$) (I	201100110				
	o (Code) (Expenses \$ including grants of \$) (Fig. 2)	revenue .	۶			
		- -				
			- -		-	
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					-	
4.	c (Code) (Expenses \$ including grants of \$) (I					
40	(Code) (Expenses \$\frac{1}{2} \] including grants of \$\frac{1}{2} \]	Revenue	۶ —			'
			~			
		=				
					- 	
	d Other program services (Describe in Schedule O)	·				
→ ((Expenses \$ including grants of \$) (Revenue \$				`	
_	e Total program service expenses > 14.034.610				,	

BAA

`			Yes	No
٠1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
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, for escrow or custodial account liability, 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		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, VIII, IX, or X as applicable	 3		
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	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	11 b		Х
(c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e	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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		X
ı	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 and XII is optional	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
1	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	х	
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 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 (see instructions)	17		Х
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
ļ	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		L

`			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1° If 'Yes,' complete Schedule I, Parts I and II	21		Х
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 employees? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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 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)			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
29	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
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 VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 ((2012)

	Check if Schedule O contains a response to any question in this Part V			
_			Yes	No
`1 a	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 7		3 ⁸ .	:
1	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		, , ,	ĺ
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		. , , .	
	(gambling) winnings to prize winners?	1 c		X
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-		÷,	,
	ments, filed for the calendar year ending with or within the year covered by this return 2 a 5		ه نقید	
ı	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			l
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ı	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4 :	a 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)?	4 a	Х	
I	of 'Yes,' enter the name of the foreign country Israel	, ,	* * * * * * * * * * * * * * * * * * * *	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	~	7 .	ľ
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
I	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0	,	6
		, '-	~ 3	1
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
	if 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		X
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	70	^* /*	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	Lann orth	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			<u> </u>
,	as required?	7 q		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	,	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the		я	1
•	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business			
_	holdings at any time during the year?	8		L
9	Sponsoring organizations maintaining donor advised funds.		<u> </u>	
	a Did the organization make any taxable distributions under section 4966?	9 a		<u> </u>
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		<u> </u>
	Section 501(c)(7) organizations. Enter	4.5		
	a Initiation fees and capital contributions included on Part VIII, line 12	2	V.	
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	4		
	Section 501(c)(12) organizations. Enter	* *-	E.	7-3
•	a Gross income from members or shareholders.		, "	
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	- » 		2
	a Section 4947(a)(1) non exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	`_,`}		
	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	× x.
	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O			
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		,	, ,
•	c Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
	h If 'Vos' has it filed a Form 720 to report those payments? If 'No' provide an explanation in Schodule O			$\overline{}$

Form 990 (2012) NEFESH B'NEFESH JEWISH SOULS UNITED, INC 22-3804152 Page 6 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 X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 6 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 b Enter the number of voting members included in line 1a, above, who are independent 5 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? See Schedule 0 X officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Χ 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Δ Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7 a 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 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or other persons other than the governing body? 7 b Х 19.WY Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х **b** Each committee with authority to act on behalf of the governing body? X 86 Is there any officer, director or 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 NO. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts' 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? X 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? a The organization's CEO, Executive Director, or top management official See Schedule O 15 a X **b** Other officers of key employees of the organization 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х **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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b or public

Sec	ction C. Disclosure	
17	List the states with which a copy of this Form 990 is required to be filed ► None	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply	ivailable for public
	Own website X Another's website X Upon request Other (explain in Schedule 0)	
19	Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year See Schedule O	lable to
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	
	DONA DEC 50 EISENHOWER DRIVE PARAMUS NJ 07652 (201) 291-1060	
BAA	TEEA0106L 08/08/12	Form 990 (2012)

Form 990 (201)	2) NEFESH	B'MEFFCH	TEWITCH	SULLUS	HMTTED	TNC
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age 7

Part VIII 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

- 1 a 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

				(C	;)					
(A) Name and Title	(B) Average hours per week (list any hours	offic	on (do ox, un er an	not o less p d a d	check persor precto	more the more the more the more than the mor	*)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Former Highest compensated employee Key employee Officer		Former	the organization (W 2/1099 MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) DORIS BRANDSTATTER	0.5									
Secretary	0	Х		Χ				0.	0.	0.
(2) TONY GELBART	20									
Pres. & Treas.	0	X		_X				0.	0.	0.
(3) RUSSEL ROBINSON	0.5	1								
Director	0	X						0.	0.	0.
(4) ROBERT_GOLDBERG	0.5_	1					Ì			
Director	0	X						0.	0.	0.
_(5)_MALCOLM_HONLEIN	0.5_									
Director	0	X						0.	0.	0.
_(6)_CHERNA_MOSKOWITZ	0.5_					1		_	_	_
Director	0	X						0.	0.	0.
	40	-								_
Executive Direc	0			X				86,956.	0.	0.
_(8)_RUTH_HALEVY	40	+								_
Controller	0			_X				72,027.	0.	0.
(9) DANNY OBERMAN	0									_
Dir-Operations	0				X			189,281.	0.	0.
(10) EREZ_HALFON	40	+						4.66 700		
<u>Co-chairman</u>	0	<u> </u>				Х		166,788.	0.	0.
(11) YAEL KATSMAN	40	ļ						117 500		
Dir-Marketing/Comm	0					X		117,632.	0.	0.
(12)		1								
(13)										
(14)										
<u></u>		t								

3 die in Octobra. Officers, Directors, Trus		NCy			-	C3,	ann	i riigilest con	iperisateu Lii	Employees (Cont)				
• (A) Name and title	Average hours per week (list any hours for related organiza - tions below dotted line)	box	, unle cer ar	:heck :ss pe	sition more erson direct	than or Highest compensated	h an itee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organization (W-2/1099-MISC)					
(15)		-	3			e e								
(16)									•					
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)							ļ,							
(24)								<u> </u>						
(25)														
1 b Sub-total					L	l		632,684.	C	0.				
c Total from continuation sheets to Part VII, Section	nΔ						•	032,004.	o					
d Total (add lines 1b and 1c)							•	632,684.	0					
2 Total number of individuals (including but not limited to from the organization 3	o those I	sted	abov	ve) v	who	recei	ved							
										Yes No				
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	ındıvıdu	ıal								3 X				
4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater such individual	eportab than \$1	le co 50,00	mpe	ensa If 'Y	ition Yes'	and com	oth <i>plet</i>	er compensation e Schedule J for	from	4 X				
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	comper comple	satio	n fre chea	om . Iule	any <i>J fo</i>	unre	late ch p	ed organization or erson	ındıvıdual	5 X				
Section B. Independent Contractors														
Complete this table for your five highest compensation from the organization. Report compensation.	ated ind ation for	epen the c	dent	t coi dar y	ntra year	ctors endi	tha ng v	vith or within the or	ganızatıon's tax ye					
(A) Name and business addre	ess							Description	of services	(C) Compensation				
	0 Isra							INTERNET ADVE		192,367.				
CASPY & CASPY CPA MALCHA TECHNOLOGY PARK JE	RUSALE	М,	Is	rae	1			TAX/ACCOUNTIN	G SVCS	203,545.				
IMP 97 JAFFA ROAD JERUSALEM, Israel ADVERTISING										283,609.				
MANTBAR 37 SHAUL HAMELECH STREET TEL AVIV, 61336 Israel WELCOMING CEREMONY										132,066.				
2 Total number of independent contractors (including bu \$100,000 in compensation from the organization		ited to	o the	se I	ısted	abo	ve)	 who received more	than					
ΒΔΔ		TEFAC	1001	01/	24/12				<u>k</u> ".	Form 990 (2012)				

		 Check if Schedule O 	contains a res	ponse to any quest	ion in this Part VIII			
S					(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	b c	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions)						
PROGRAM SERVICE REVENUE AND OT		All other contributions, gifts, c similar amounts not included Noncash contributions include Total. Add lines 1a-1f		15, 939, 427.	19,891,269.			
Ē	2 a	SPONSORSHIPS			200 000	202 022		
쮼				900099	202,832.	202,832.		
읗		APPLICATION & OTHE		900099	175,689.	175,689.		
巤	d	THE SALE PROPERTY.	<u>N15</u>	900099	111,256.	111,256.		
ş	^	OTHER		900099	34,304.	34,304.		
8		All other program serve						
욽	'	All other program service Total. Add lines 2a-2f	Le revenue			2.57 of Ø 31.46 W 198	N 3 4 L 18/8 - M N GA.	
	3	Investment income (incother similar amounts)		•	524,081.	^ - = 2- * * * * *		
	4	Income from investmen	it or tax-exemp	n bona proceeds				
	5	Royalties	() D			1 200 S. W.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	٠.	O	(ı) Real	(ii) Personal				
		Gross rents						
		Less rental expenses						
		Rental income or (loss)			أسالك المناب المناب المستشركات			1200.411
	C	Net rental income or (lo		>				
l	7 a	Gross amount from sales of	(i) Securities	(II) Other			**************************************	
		assets other than inventory						
	b	Less cost or other basis			KHALIBE			
		and sales expenses						
		: Gain or (loss)					JAN AREL	
	d	Net gain or (loss)		>				_
ÆNUE	8 a	Gross income from fund (not including \$of contributions reported)	J	-				
띭		See Part IV, line 18	d on line 1c)					
OTHER REVEN		Less direct expenses		a				
5		: Net income or (loss) fro	6	D				
				events	4 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		2200	628 -80900 575
	9 a	Gross income from gan See Part IV, line 19	ning activities					
		Less direct expenses		a l				
		: Net income or (loss) fro	m aomina oot	D				security of an analysis of the contract of
				villes	18 4 7 1 4 70 JP (1986)	5 N 1888 12 S	9 C 6/37 C 800 AN VOL 1	L 1885 1977
		Gross sales of inventory and allowances Less cost of goods sold		a b				
		: Net income or (loss) fro		~				
ŀ		Miscellaneous Reveni		Business Code				1
ł	11 a				<u> </u>			
	b					· · · · · · · · · · · · · · · · · · ·		
	~							
	, ,	All other revenue						
	_	Total. Add lines 11a-11	d			L	***********	
					00 115 055			<u> </u>
	12	Total revenue. See inst	ructions	_	20,415,350.	524,081.	0.	0.

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) Check if Schedule O contains a response to any question in this Part IX (A) Do not include amounts reported on lines 6b, èxpenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 2,724,838 2,724,838 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 348,291 189,308 0. 158,983 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0 Other salaries and wages 4,160,956 784,879 276,595 99,482. Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 450,488 397,186 49,554 3,748. Payroll taxes 500,326. 52,304 9,750. 438,272 11 Fees for services (non-employees) a Management 140,000. 140,000 **b** Legal 74,282 74,282. c Accounting 194,517 194,517. d Lobbying e Professional fundraising services See Part IV, line 17 ***** 100 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O) Advertising and promotion 813,758 813,758 Office expenses 13 22,883 <u>81,750</u> 58,867 Information technology 14 273,969 205,538 68,431 15 Royalties 16 Occupancy 652,749 618,472 34,277 17 Travel 332,688 185,856 146,832 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest 178,175 178,175 21 Payments to affiliates 22 Depreciation, depletion, and amortization 216,728 196,129 20,599 23 9,025 9,025 Other expenses Itemize expenses not covered above (List miscellaneous expenses 24 × 10 in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a FLIGHT EXPENSES 2,627,655 2,627,655 **b** ENCOURAGING IMMIGRATION 1,163,110 1,163,110 c COMMUNICATION 264,829 249,574 15,255 d EVENTS FOR IMMIGRANTS 216,563 216,563 e All other expenses 433,845 200,589 233,256 Total functional expenses Add lines 1 through 24e. 14,034,610 15,858,542 1,710,952 112,980. 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)

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 14,264 1 1,041,474 Savings and temporary cash investments. 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 272,518 753,830 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 36,485 39,335 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 2,293,247 **b** Less accumulated depreciation 10b 1,554,472 652,008 10 c 738,775 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 243,669 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,703,106 16 2,089,252 17 Accounts payable and accrued expenses 17 2,853,667 1,906,943 18 Grants payable 18 19 Deferred revenue 19 420,000. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 1,146,798. 22 300,000. 23 Secured mortgages and notes payable to unrelated third parties 4,246,111 23 471,798. Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 2,630,464 25 1,000,549. 26 Total liabilities. Add lines 17 through 25 26 10,877,040 4,099,290. Organizations that follow SFAS 117 (ASC 958), check here > X and complete \$5.50mm lines 27 through 29, and lines 33 and 34. ASSETS Unrestricted net assets 27 27 -9,783,334 5,226,526. 28 Temporarily restricted net assets. 28 609,400 3,216,488. Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances -9,173,934 33 -2,010,038 34 Total liabilities and net assets/fund balances. 34 2,089,252. 1,703,106

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TOTAL 950 (2012) NEFESH B NEFESH JEWISH SOULS UNITED, INC	22-380415	Z Page IZ
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	20,415,350.
2 Total expenses (must equal Part IX, column (A), line 25)	2	15,858,542.
3 Revenue less expenses Subtract line 2 from line 1	3	4,556,808.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-9,173,934.
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities .	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	9	2,607,088.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	0 010 030
Rart XII Financial Statements and Reporting	10	-2,010,038.
Check if Schedule O contains a response to any question in this Part XII		
4 4 4 W 4 4 W 5 000 To 4 To 4 To 9		Yes No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled of separate basis, consolidated basis, or both	or reviewed on a	
Separate basis Consolidated basis Both consolidated and separate basis		Action on Analysis - American Jos. 3th Invited and Analysis -
b Were the organization's financial statements audited by an independent accountant?		2b X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited or basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	ı a separate	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2 c X
If the organization changed either its oversight process or selection process during the tax year, expin Schedule O		
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Audit Act and OMB Circular A-133?	e Sıngle	3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3 b
ВАА		Form 990 (2012)

SCHEDULE, A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Schedule A (Form 990 or 990-EZ) 2012

Open to Public Inspection

Name o	f the	organization										Employe	r identifica	tion number			
		H B'NEFESH JEW										22-3804152					
Part	\$ 1 %	Reason for Publ	ic Charity St	atus	(All org	ganızatı	ons	must d	comple	te this	part.)	See i	nstruct	ions.			
		nization is not a priva															
1		A church, convention	of churches or	assoc	ation of	churches	s desc	cribed in	section	170(b)	(1)(A)(i)						
2	П	A school described in	section 170(b)	(1)(A)	(ii). (Atta	ch Sched	dule E	:)									
3	П	A hospital or a coope	erative hospital	service	e organiz	ation des	scribe	d in sec	tion 17	0(b)(1)(A	A)(iii).						
4	П	A medical research of	organization ope	erated	ın conjur	nction wit	hah	ospital d	describe	d in sec	ction 17	0(b)(1)(A	A)(iii) Er	nter the hos	spital's	ذ	
		name, city, and state	!					-							•		
5		An organization operat	ted for the benefi	t of a	college or	university	y own	ed or op	erated by	y a gove	rnmenta	I unit des	scribed in	section			
6	\Box	A federal, state, or lo	cal government	t or go	vernmer	ital unit d	descri	bed in s	ection 1	70(b)(1)(A)(v).						
7	X	in section 170(b)(1)(A	In that normally receives a substantial part of its support from a governmental unit or from the general public described 0(b)(1)(A)(vi). (Complete Part II)														
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)															
9		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)															
10	Ш	An organization orga	•						,		, ,	` '					
11		An organization organization supported organization supporting organization	is described in se	ection :	509(a)(1)	or section	า 509(perform (a)(2) Se	the func ee sectio	tions of, on 509(a)	or carry (3). Che	out the p ck the bo	urposes ox that de	of one or mo escribes the	re pub type o	licly f	
		a ∏Type I b		С		_		nally inte	egrated		d \Box	Type III	- Non-fi	unctionally	ıntear	ated	
е														2104			
f		If the organization rece check this box	eived a written de	etermin	nation fror	n the IRS	that i	s a Type	I, Type	II or Typ	e III sup	porting o	organızatı	ion,			
g		Since August 17, 200	06, has the orga	anızatıd	on accep	ted any g	gift o	r contrib	ution fr	om any	of the fe	ollowing	persons	57			
															Yes	No	
		(i) A person who obelow, the gove	directly or indire erning body of t	ctly co he sup	ontrois, e oported o	ither alor rganizati	ne or on?	togethe	r with pe	ersons c	describe	d ın (ıı)	and (III)	11 g (i)			
		(ii) A family memb	er of a person o	describ	oed in (i)	above?								11 g (ii)			
		(iii) A 35% controlle	ed entity of a pe	erson d	described	l ın (ı) or	(II) a	bove?						11 g (iii)			
h		Provide the following	information ab	out the	e support	ted organ	nizatio	on(s)									
		(i) Name of supported organization	(n) EIN		(describ above	e of organiza ed on lines or IRC secti instructions	1-9 ion	organiz column (your go	s the sation in listed in overning ment?	(v) Did ye the organ column (supp	ou notify lization in (i) of your port?	organiz colui organiz	Is the zation in mn (i) ed in the S ?	(vii) Amoun sup	t of mon	etary	
								Yes	No	Yes	No	Yes	No				
(A)																	
<u> </u>				-				-		-							
(B)											-						
(C)											_						
(D)																	
(E)																	
Total																	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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 I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support			<u> </u>			<u> </u>
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants ')	17137044.	19081709.	14303041.	16168081.	19891269.	86,581,144.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	17137044.	19081709.	14303041.	16168081.	19891269.	86,581,144.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1						
	that exceeds 2% of the amount shown on line 11, column (f)						13,727,412.
6	Public support. Subtract line 5 from line 4					AN SE	72,853,732.
	tion B. Total Support	1					
begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	17137044.	19081709.	14303041.	16168081.	19891269.	86,581,144.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	76,477.	308,612.	459,674.	582,349.	524,081.	1,951,193.
11	Total support. Add lines 7 through 10						88,532,337.
12	Gross receipts from related activ	vities, etc (see ins	tructions)			12	0.
13	First five years. If the Form 990 is organization, check this box and		n's first, second, th	ırd, fourth, or fıfth t	ax year as a section	on 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	blic Support P	Percentage				
	Public support percentage for 20			ne 11, column (f))		14	82.29%
	Public support percentage from		•			15	78.76%
16 a	33-1/3% support test $-$ 2012. If and stop here. The organization	the organization qualifies as a pu	did not check the blicly supported o	box on line 13, ai rganization	nd the line 14 is 3	33-1/3% or more,	check this box
t	33-1/3% support test — 2011. If and stop here. The organization	the organization of qualifies as a pu	lid not check a bo blicly supported o	x on line 13 or 16 irganization	a, and line 15 is	33-1/3% or more	check this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop he	re. Explaio in Par	t IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an Private foundation. If the organi	meets the 'facts-and-circumstances'	and-circumstance test The organiza	s' test, check this ation qualifies as	box and stop he a publicly suppori	r e. Explain in Par led organization	t IV how the ►
		Zation did Hot Che		15, 10a, 100, 17a			
BAA					Scl	nedule A (Form 9	90 or 990-EZ) 2012

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sect	ion A. Public Support			·			
Calend	lar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
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.						
	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge.						
	Total. Add lines 1 through 5 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						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						77
	tion B. Total Support						
	dar year (or fiscal yr beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
_	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,					<u></u>	
	royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	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					.,	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)					<u> </u>	
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, seco	nd, third, fourth, c	or fifth tax year as	a section 501(c)	D(3) ► □
	tion C. Computation of Pu						
	Public support percentage for 20	· · · · · · · · · · · · · · · · · · ·	•	ne 13, column (f)))	15	%
_16	Public support percentage from	2011 Schedule A,	Part III, line 15			16	%
Sec	tion D. Computation of Inv	estment Incor	ne Percentag	е			
17	Investment income percentage	for 2012 (line 10c,	column (f) divide	ed by line 13, colu	ımn (f))	17	્ર
18	Investment income percentage					18	%
19 a	33-1/3% support tests – 2012. I is not more than 33-1/3%, check	f the organization k this box and sto j	did not check the here. The orga	e box on line 14, a nization qualifies a	and line 15 is mor as a publicly supp	e than 33-1/3%, orted organizatio	and line 17
	33-1/3% support tests – 2011. i line 18 is not more than 33-1/3%	check this box a	and stop here. Th	ne organization qu	ialifies as a public	ly supported org	anization -
20	Private foundation. If the organ	ization did not che	ck a box on line	14, 19a, or 19b, c	theck this box and	see instructions	•

Schedule A	(Form 990 or 9	990-EZ) 2012	NEFESI	H B'NEFES	SH JEWISH	I SOULS	UNITED,	INC	22-3804152	Page 4
Part IV.	Suppleme Part II, lin (See instri	ntal Inform e 17a or 17l uctions).	ation. Corb; and Par	mplete this t III, line 12	part to pro 2 Also cor	ovide the nplete th	explanati is part for	ons req any ad	uired by Part II, line ditional information.	10,
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BAA

Schedule A (Form 990 or 990-EZ) 2012

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

2012

Open to Public

Inspection

Employer identification number

	FESH B'NEFESH JEWISH SOULS UNI				22-3804152	
Pai	Organizations Maintaining Dono	or Advised Funds or Oth	ner Similar Fun	ds or Acc	ounts. Complet	e if
	the organization answered 'Yes'	· · · · · · · · · · · · · · · · · · ·		· ········		
_		(a) Donor advised	funds	(b) Fu	unds and other acc	ounts
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 dor are the organization's property, subject to the	nor advisors in writing that the organization's exclusive legal	e assets held in do control?	nor advised f	funds Yes	No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	ers, and donor advisors in write t of the donor or donor adviso	ing that grant fund r, or for any other	ls can be use purpose con	d only ferring	— ∏ No
Pai	Conservation Easements. Comp	lete if the organization a	answered 'Yes'	to Form 9	90 Part IV line	
1				10 1 01111 5	30, 1 art 14, min	
	Preservation of land for public use (e g , r	recreation or education)	Preservation o	f an historica	lly important land	area
	Protection of natural habitat	·	_		nistoric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization hast day of the tax year	neld a qualified conservation cor	ntribution in the form	n of a conserv	ation easement on t	he
				ALT H	eld at the End of the	ne Tax Year
	Total number of conservation easements			2 a		
ı	Total acreage restricted by conservation ease	ments		2 b		
(Number of conservation easements on a certi-	fied historic structure included	l ın (a)	2 c		
(Number of conservation easements included i structure listed in the National Register	n (c) acquired after 8/17/06, a	and not on a histor	1C 2 d		-
3	Number of conservation easements modified, trantax year ►	nsferred, released, extinguished,	or terminated by th	ne organization	n during the	
4	Number of states where property subject to conse	ervation easement is located >				
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitorin	ng, inspection, har	- ndling of viola	itions, Yes	No
6	Staff and volunteer hours devoted to monitoring, i	inspecting, and enforcing conse	rvation easements o	during the year	r	
7	Amount of expenses incurred in monitoring, insper ▶\$	ecting, and enforcing conservation	on easements during	g the year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the re	equirements of sec	ction 170(h)(4	1)(B)(i) Yes	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements	s conservation easements in its to the organization's financial	revenue and expens statements that d	se statement, escribes the	and balance sheet, organization's acco	and ounting for
Pai	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or), Part IV, line	Other Sim 8.	ilar Assets.	· · ·
1 8	If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	eld for public exhibition, education	on, or research in fu	nue statemen ortherance of p	t and balance shee	et works of le,
ı	If the organization elected, as permitted unde historical treasures, or other similar assets held for following amounts relating to these items	r SFAS 116 (ASC 958), to report public exhibition, education, c	ort in its revenue or research in furthe	statement an rance of public	id balance sheet w c service, provide th	orks of art, e
	(i) Revenues included in Form 990, Part VIII,	, line 1			► \$	
	(ii) Assets included in Form 990, Part X				► \$	
	If the organization received or held works of art, hamounts required to be reported under SFAS	116 (ASC 958) relating to the	ılar assets for fınanı se items	ciał gain, prov	ide the following	
7	a Revenues included in Form 990, Part VIII, line	e 1			► \$	
ı	Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2012 NEFESH B'NEFI	ESH JEWISH SOU	LS UNITED, IN	IC	22-3804		Page 2
Rangellia Organizations Maintaining Colle	ections of Art, His	torical Treasure	s, or Other	Similar Asse	ts (continu	ied)
 Using the organization's acquisition, accession, a items (check all that apply) 	and other records, check	any of the following t	hat are a signi	ficant use of its co	ollection	
a Public exhibition		n or exchange progr	ams			
b Scholarly research	e Oth	er				
c Preservation for future generations 4 Provide a description of the organization's collect	ions and explain how the	ney further the organiz	ation's exempt	purpose in		
Part XIII						
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	receive donations of intained as part of the	art, nistoricai treasui e organization's colle	res, or other s ction?	imilar assets	Yes	No
Escrow and Custodial Arrangements. reported an amount on Form 99	Complete if the orgai 0, Part X, Iine 21.	nization answered 'Y	es' to Form 9	90, Part IV, line	9, or	
1 a Is the organization an agent, trustee, custodia on Form 990, Part X?			or other asset	s not included	Yes [
b If 'Yes,' explain the arrangement in Part XIII a	and complete the folio	wing table				
a Daguagua halau					Mount	
 c Beginning balance d Additions during the year 			10	 		
e Distributions during the year			1 0	1		
f Ending balance			1 e	-	 ,	
2a Did the organization include an amount on Fo	rm 990. Part X. line 2	717		<u> </u>	Yes	No
b If 'Yes,' explain the arrangement in Part XIII			vided in Part	XIII	J .c3	⊣‴
	·	·			L	
Parts Endowment Funds. Complete if		answered 'Yes' to	o Form 990	, Part IV, line	10.	
(a) Currel	nt (b) Prior	year (c) Two yea	ers (d)	Three years	(e) Four yea	rs
1 a Beginning of year balance b Contributions					····	
c Net investment earnings, gains, and losses						
d Grants or scholarships					<u> </u>	
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a))	held as		-	
a Board designated or quasi-endowment ►	°					
b Permanent endowment ►						
c Temporarily restricted endowment	% %					
The percentages in lines 2a, 2b, and 2c should	ld equal 100%					
3 a Are there endowment funds not in the possession organization by	of the organization tha	at are held and admini	stered for the		Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related organizations	·			Į	3b	
4 Describe in Part XIII the intended uses of the						
Part VI Land, Buildings, and Equipmen			1 () 4		(d) D1	
Description of property	(a) Cost or other bas (investment)	basis (other)	der	ccumulated preciation	(d) Book va	alue ———
1 a Land b Buildings		_	L5 24104			
c Leasehold improvements		662.5	02	272 200	200	201
d Equipment		662,5		272,208.		<u>, 384.</u>
e Other		1,304,7		,118,797. 163,467.		<u>,970.</u> ,421.
Total. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part 2			103,407.		,421. ,775.
ВАА			```	Schedul	e D (Form 990	

Schedule D (Form 990) 2012 NEFESH B'NEFESH JE	WISH SOULS UNI	TED, I	NC		22-38	04152	F	Page 3
Part VII Investments - Other Securities. See		line 12.						
(a) Description of security or category (including name of security)	(b) Book value		(c) N e	nethod o	f valuatio ar marke	n Cost or t value	_	
(1) Financial derivatives					<u> </u>			
(2) Closely-held equity interests								
(3) Other								
(A)								
(B)	·							
(C) (D)								
(E)								
(F)				-				
<u>(G)</u>								
(H)	 							
<u>(i)</u>						-		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			·			ž		`,
Part VIII Investments - Program Related. See	Form 990 Part X		N/2			<u>*</u> >		
(a) Description of investment type	(b) Book value		(c) N	Nethod o		n Cost or		_
(1)			е	nd-of-ye	ar marke	t value		
(2)	····			***************************************				
(3)								
(4)								
(5)								
(6)	-							
(7)								
(8)								
(9)								
(10)		. 1377 3	8 2 2 2 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4		3 9. × +299	14 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E	- 44.	3 (JAK /
Total (Column (b) must equal Form 990, Part X, column (B) line 13) ► Part IX: Other Assets. See Form 990, Part X, I	ne 15. N/A	7 35	YA & Y	36. £%		F11 W. 7	<u> </u>	1.12g. x
	scription					(b) F	Book valu	
(1)	3011011			<u>-</u>		(5)	JOOK Vale	
(2)						+		
(3)						 		
(4)								
(5)						†		
(6)						-		
(7)								
(8)								
(9)								
(10)								
Total. (Column (b) must equal Form 990, Part X, column (E	<u> </u>			_	þ	>		
Part X Other Liabilities. See Form 990, Part >	K, line 25.							
(a) Description of liability	(b) Book value			32rd	, di sa.	X* 4	× .	
(1) Federal income taxes				32	, 2	*3	٠,	
(2) ACCRUED SEVERANCE PAY	321,28			4	will .	······································	•	ij
(3) CURRENT MATURITIES - L/T LOANS	76,60			*				Ì
(4) OTHER PAYABLES	66,42		í,	ž	40%			, j
(5) SHORT-TERM BORROWINGS	536,23	88.	₩.	• 🖟 •	ď.	ų.	j, ' %.	
(6) (7)								,1
(8)			٠. ٨	â	aj.	,		.]
(9)			₩.	*	*£0*	~~	, -v;4	إنب.
(10)		_		•				
(11)		4	À.	, M.	Ø.	Ž.	, æ	-]
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	1 ,000,54		* 254	-	\$ `	£\$	•	
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to			nat reports th	ne organiza	tion's liabili	ty for uncert	ain tax nor	sitions
under FIN 48 (ASC 740) Check here if the text of the footnote has been prov	ided in Part XIII			5		,//00/1	۲۰۰۰	

Schedule D (Form 990) 2012 NEFESH B'NEFESH JEWISH SOULS UNITED, INC	22-3804152	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return N/A	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	3.77.	
a Net unrealized gains on investments 2 a	(4.3)	
b Donated services and use of facilities 2 b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	3 (
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	1 - 1	
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	* **	
a Donated services and use of facilities 2a		
b Prior year adjustments 2b		
c Other losses 2 c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	5 4 5	<u>.</u>
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information		<u></u>
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Paline 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provid	art IV, lines 1b and 2b, le any additional informa	Part V, ation
BAA	Schedule D (Form	990) 2012

Schedule F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public !

Department of the Treasury Internal Revenue Service Name of the organization

NEFESH B'NEFESH JEWISH SOULS UNITED, INC

Employer identification number

22-3804152

Partil 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 the grantees' eligibility for	e organization mai the grants or assis	ntain records to s stance, and the s	substantiate the election criteria	e amount of its of used to award	grants and other assista the grants or assistance	nce, 2 ² Yes No
2 For grantmakers. Describe a United States	n Part V the organiz	zation's procedures	for monitoring	the use of its gra	nts and other assistance o	outside the
3 Activities per Region (The	e following Part I, I	ine 3 table can be	e duplicated if a	additional space	ıs needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	region (by fundraisin services, ir	conducted in type) (e g , g, program nvestments, recipients 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
					SOCIAL	
(1) ISRAEL	1	94	PROGRAM S	ERVICES	SERVICES	13,615,294.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)				· · · · · · · · · · · · · · · · · · ·		
(9)						
(10)						
(11)						
(12)						
(13)						···
(14)						
(15)						
(16)						
(17)						
3 a Sub-total	1	94	3,			13,615,294.
b Total from continuation sheets to Part I					f f	
c Totals (add lines 3a and 3b)	1 1	94	İ			13,615,294.

Page 2

Schedule F (Form 990) 2012 NEFESH B'NEFESH JEWISH SOULS UNITED, INC

| Part | | Grants and Other Assistance to Organizations or Entities 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. Part II can be duplicated if additional space is needed.

-	(a) Name ((a) Name of organization	L CO	(b) IF section (if app	(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, appraisal, other)
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(15)	, , , ,	~ ,										
(9D).	**	· ·	68		12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2							
	oter total number	of recinient	organizat	patsil suoi,	ahove that are	recognized as char	thes by the foreign	Enter total pumber of recipient organizations listed above that are recognized as charities by the foreign country recognized as tax-exempt by the IRS or for which	va tax-exemnt by	the IRS or for which	 	

2 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

Schedule F (Form 990) 2012

3 Enter total number of other organizations or entities BAA

TEEA3502L 12/17/12

Page 3

Schedule F (Form 990) 2012 NEFESH B'NEFESH JEWISH SOULS UNITED, INC

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

מניה) וויכי מני וויכים מלווי ממוח מכן מתלווים מחודים מתחומים וויכים מלווים מחודים מתחומים מתחו	מים ממשווכמוכם וו מכ	dicional abacc	i coaca:				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)				LOANS CONVERTED			
(2) EMIGRANT GRANTS	ISRAEL	1,471	2,724,838.	INTO GRANTS		N/A	N/A
(3)							
(4)							
(5)							
(9)							
6							
(8)					•		
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(71)							
(18)							
ВАА						Schedule F (Schedule F (Form 990) 2012

BAA	TEEA3505L 12/17/12	Schedule F (F	orm 990) 2012
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	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
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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	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)	n Yes	X 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)	n Yes	X No
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)	Yes	X No
	Foreign Forms		
Sche	dule F (Form 990) 2012 NEFESH B'NEFESH JEWISH SOULS UNITED, INC 22	-3804152	Page 4

	(Form 990) 2012	NEFESH E	'NEFESH	JEWISH	SOULS	UNITED,	INC	22-3804152	Page 5
Part V	Supplemental								
,	Complete this column (f) (ac (accounting m recipients), as	part to prove counting me ethod), Par applicable.	vide the in ethod; am t III (accoi . Also com	formation ounts of i unting me aplete this	require nvestme thod); a part to	ed by Part ents vs exp and Part II provide a	I, line 2 penditui I, colum ny addi	? (monitoring of funds); Part I, I res per region); Part II, line 1 in (c) (estimated number of tional information (see instructi	line 3,
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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545 0047

ဲ့: Open to Public ် နဲ့ Inspection ွဲ, ်

Department of the Treasury Internal Revenue Service Name of the organization

NEFESH B'NEFESH JEWISH SOULS UNITED, INC

Employer identification number

22-3804152

Questions Regarding Compensation No Yes 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Ó, X First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence X Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1 b X 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 X Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? 4 a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4 b c Participate in, or receive payment from, an equity-based compensation arrangement? 4 c If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5 a X b Any related organization? 5 b If 'Yes' to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6 a b Any related organization? 6 h If 'Yes' to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? 'Yes,' describe in Part III R Х If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule **J** (Form 990) 2012

Page 2

Schedule J (Form 990) 2012 NEFESH B'NEFESH JEWISH SOULS UNITED, INC

[Parill Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(I) Base compensation	(II) Bonus and incentive compensation	(III) Other reportable compensation	and otner deferred compensation	Denefits	columns(b)(l)-(U)	deferred in prior Form 990
DANNY OBERMAN	€	189, 281.	0	0	.0 0		189,28	0-
1 Dir-Operations	€	0.	0			0.		0.
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BAA

Schedule J (Form 990) 2012

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service Name of the organization

NEFESH B'NEFESH JEWISH SOULS UNITED, INC

Open to Public Inspection

Employer identification number

22-3804152

1	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Corr	ected
		person and organization		Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2 E	nter the amount of tax incurred by ection 4958	the organization managers or disqualified per	rsons during the year under	1	
3 E	nter the amount of tax, if any, on l	ine 2, above, reimbursed by the organization	►s		

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fror	an to or n the ization?	(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(ı) W agree	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
(1) TONY GELBAR	PRESIDNT	WRKGCPTL	Х		3,559,000.	471,798.		Х		Х		Х
(2) SIM&ESTHER I	ASS											
(3)	INDIRECT	WRKGCPTL	Х		400,000.	300,000.		Х		Х		Х
(4)												
(5)												
(6)							İ					
(7)						* * * * * * * * * * * * * * * * * * * *	1					
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(9)												
(10)			i								_	
Total					▶ \$	771,798.	441	× :	۰	- Ar 3	· , e . ·	

Partill 5 Grants or Assistance Benefiting Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 27

·	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)			***		
(9)					
(10)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

Part V Busine	90 or 990-EZ) 2012 NEFE ess Transactions Invo e if the organization answere	lving Interested Pers	sons.		F	Page 2
	of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	
(1) FASS CONS	ULTING, INC	OWNED BY	140,000.	MANAGEMENT SERVICES	Yes	No X
(2)	oblino, inc	EXEC. DIRECTOR	140,000.	MINITODPIENT SERVICES	+	X
(3)					+	
(4)						
(5)						
(6)						
<u>(7)</u>					<u> </u>	ļ
(8)						
(10)					 	
Part W Supplen	nental Information his part to provide additiona	al information for response	es to questions on Sched	ule L (see instructions).		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

OMB No 1545-0047

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.

Openito Publica Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

NEFESH B'NEFESH JEWISH SOULS UNITED, INC	22-3804152
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Die	rectors, Etc.
JOSHUA FASS, EXECUTIVE DIRECTOR AND DORIS BRANDSTATTER, SE	CRETARY AND A DIRECTOR -
FAMILY RELATIONSHIP	
Form 990, Part VI, Line 11b - Form 990 Review Process	
FORM 990 WAS DISTRIBUTED TO BOARD MEMBERS AND OUTSIDE CONS	ULTANTS PRIOR TO
SUBMISSION TO THE IRS FOR REVIEW AND COMMENTS.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CE	O, Top Management
A COMMITTEE OF NON-BOARD MEMBER AND NON-OFFICERS CONDUCTED	A SURVEY OF THE
COMPENSATION OF EXECUTIVES OF NOT-FOR-PROFIT ORGANIZATIONS	OF APPROXIMATELY SIMILAR
SIZE. THE COMMITTEE SUBMITTED ITS FINDINGS TO THE BOARD O	F DIRECTORS WHO THEN
ESTABLISHED THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND	OTHER MANAGEMENT
SALARIES. THE COMPENSATION THAT WAS ESTABLISHED WAS DOCUM	ENTED IN THE
ORGANIZATION'S MINUTES OF THE BOARD MEETING. SUBSEQUENTLY,	MODEST ANNUAL INCREASES
HAVE BEEN IMPLEMENTED.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Availa	able
THE ORGANIZATION HAS NOT MADE ITS GOVERNING DOCUMENTS, CON	FLICT OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.	

201	4

Schedule A, Part IV - Supplemental Information

Page 5

NEFESH B'NEFESH JEWISH SOULS UNITED, INC

22-3804152

Nature and Source		_	2012	 2011	_	2010	 2009	_	2008
PROGRAM SERVICES SPONSORSHIPS		\$	321,249. 202,832.	\$ 344,331. 238,018.	\$	255,630. 204,044.	\$ 308,612.	\$	76,477.
	Total	\$	524,081.	\$ 582,349.	\$	459,674.	\$ 308,612.	\$	76,477.

2012

Schedule O - Supplemental Information

Page 2

NEFESH B'NEFESH JEWISH SOULS UNITED, INC

22-3804152

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

INCREASE IN RESTRICTED ASSETS

 \$
 2,607,088.

 \$
 2,607,088.