

# 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



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

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

OMB No 1545-0047

Open to Public

Dep	artment o	f the Treasury nue Service	► The organizat	ion may have	to use a copy of thi		•	rtına reavirei	nents.	Inspec		
A			ndar year, or tax yea				and ending	3 - 1		, 20		
В		applicable.	C Name of organization					D	Employe	r identification	number	
		change	Doing Business As					2	7-10407	96		
$\overline{\Box}$	Name ci	-	Number and street (or	r P.O box if ma	ail is not delivered to sti	reet address)	Room/suite	E	E Telephone number			
$\bar{\Box}$	Initial ref	•	101 West Mount R	loval Avenu	e			4	10-727-4	1828		
	Termina	ited	City, town or post offi	ce, state, and	ZIP code		<u> </u>					
	Amende	ed return	Baltimore, MD 212	201-5781				G	Gross rec	ceipts \$	232,258	
		tion pending	F Name and address of	principal office	er.			H(a) is this a g	oup return fo	or affiliates? Ye	es 🛛 No	
								I		cluded? Ye	_	
匸	Tax-exe	mpt status	X 501(c)(3)	501(c) (	) ◀ (insert no )	4947(a)(1) or	527	If "No,	attach a l	list (see instruct	tions)	
J	Website: ► H(c) Group exemp											
K	Form of	organization	X Corporation Trust	Associa	tion ☐ Other ►	L Yea	ar of formation	2009	M State o	of legal domicile	MD	
Р	art I	Summ	ary		<del></del>							
	1	Briefly de	escribe the organiza	ation's miss	ion or most signifi	cant activities:						
ø		The Four	idation was created	to carry out	the chantable, edu	cational and re	ligious pur	poses of Th	e Associ	ated:		
auc	1	Jewish Co	ommunity Federatio	n of Baltime	ore, Inc. (The Asso	ciated). The F	Coundation	makes grant	s to pub	hс	····	
& Governance			organizations in fu								••	
Š	2		is box ▶□ ıf the or	_			sposed of	more than 2	25% of it	ts net assets	i.	
ජේ	3		of voting members	-	• .	•			3		6	
es	4		of independent voti	•		• •			4		4	
Activities	5		nber of individuals		-	12 (Part V, line	e 2a) .		5		0	
Ş	6		nber of volunteers (		• •				6		5	
•	7a		elated business rev				7a					
	b	Net unrel	ated business taxa	<u> </u>	7b							
							<u></u>	Prior Yea		Current		
흐	8		tions and grants (Pa				<del></del>		0		220,000	
en.	9 Program service revenue (Part VIII, line				•				53,262		0	
Revenue	10		nent income (Part VIII, column (A), lines 3, 4, and 7d)								12,258	
_	11			• •					0		0	
	12		enue-add lines 8 th						53,262		232,258	
	13	Grantsa	nd similar amounts	paid (Part I	X, column (A), line	s 1–3)	· ·  _	2	64,500		375,000	
	14		paloto or for mem					0			0	
98	15		other compensation					0			0	
Expenses	16a		nal fundraising fee				· ·		0		0	
×	b		draising expenses i									
_	''	Other ex	penses (Part IX, col	umn (A), lin	es 11a-11d, 11f-2	!4e)	・・		6,512		2,333	
	18	Totalexp	enses Addines	3-17 (must	equal Part IX, colu	ımn (A), line 25	5) ·		71,012		377,333	
	19	Revenue	less expenses. Sul	otract line 1	8 from line 12 .	· · · ·	· ·		17,750)		(145,075)	
Net Assets or		Taket =:	ala (Dani V. I 40)				Be	ginning of Cun	+	End of		
Ssel	20		ets (Part X, line 16)				· ·	6	05,504		489,172	
ž į	21		ilities (Part X, line 2	•			· ·		0 0		400 170	
_			ts or fund balances ture Block	. Subtract II	ine 21 from line 20	<u>,</u>			05,504		489,172	
	art II				. A	<del></del>	<del></del>					
Ug tm	gger pena ε⊛: coπec	antes of perju et, and compl	ry, I declare that I have on the Declaration of prepared to the Control of the Co	examined triis r arer (other than	eturn, including accom officer) is based on all	ipanying schedule information of wh	s and stateme ich preparer h	ents, and to the as any knowle	e best of m dae.	iy knowledge a	.no belief, it is	
	<u> </u>		_ ( )	<u> </u>					कीन	-112		
Si	gņ	Sign	ature of officer		<del></del>			Date	0/2	<del>112</del>		
	ite ao	1!	c B. Terrill	Secret	ary/Treasurer							
• • • •	A.		or print name and title	Secret	ary, ricastici							
_		1/	pe preparer's name		Preparer's signature		Date	<del></del>		PTIN		
16		1							Check self-emp	_] if [		
	eþåre		ame ►		<u> </u>			Firm'	s EIN ▶			
US	se <del>z</del> on		ddress •					Phon				
Ma	y the II		s this return with th	e preparer :	shown above? (se	e instructions)	· · · ·		· · ·	¬Y	/es ☐ No	
_	270		ction Act Notice, see		<del></del>						n <b>990</b> (2012)	

Part	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:							
•	The Foundation was created to carry out the charitable, educational and religious purposes of The Associated:							
	James Community Endowston of Baltimore Ing (The New york). The Foundation makes are to public							
	charitable organizations in furtherance of the mission of The Associated.							
	Canada o O De la companya de la comp							
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?							
	If "Yes," describe these new services on Schedule O.							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?							
	If "Yes," describe these changes on Schedule O.							
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,							
	the total expenses, and revenue, if any, for each program service reported.							
4a	(Code: ) (Expenses \$ 375,000 including grants of \$ 375,000 ) (Revenue \$ )							
	Provide grants to public chantable organizations in furtherance of the mission of The Associated: Jewish							
	Community Federation of Baltimore.							
	•							
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)							
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )							
4d	Other program services (Describe in Schedule O.)							
74	(Expenses \$ including grants of \$ ) (Revenue \$ )							
4e	Total program service expenses ► 375,000							
	Form <b>990</b> (2012)							

Part I		<b>△</b> 11-1* . 4	C D			
		L'DOCKLIET	AT PARILIES			
	1.4	CHECKHOL	of Require	·u ·	cneuu	16.5

			162	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X	v
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	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	Α_	x
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		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	8		X
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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.			
а	complete Schedule D, Part VI	11a		х
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		X
	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 and XII	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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	, , . , ,	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		37
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>х</u> 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		_ <u>x</u> _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			
20 a		19 20a		$\frac{x}{x}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		Λ.
			. 990	

<ul> <li>Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II</li></ul>	Yes	
in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	1	
22 Did the examination engage "Vee" to Bort VII Section A line 2 4 or 5 short comparation of the	:	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated		
employees? If "Yes," complete Schedule J	X	<del> </del>
\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	a	X_
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24		$\frac{X}{X}$
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	_	
<u>landara da la companya da la compan</u>	a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	ь	X
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 21		X
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	.	X
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 28	а	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	Ь	X
c 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 28	c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	,	X
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		x
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		X_
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		X
or IV, and Part V, line 1		
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	a i	X
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	<b>b</b>	<u> </u>
<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
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,	_	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization		X

Form 99	<u> </u>				age
Part '					_
	Check if Schedule O contains a response to any question in this Part V	<del></del>	<del></del>	· ·	
4-	5. "	م ا ا	( Table 27.	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to	o vendors and			
0	reportable gaming (gambling) winnings to prize winners?	<i></i>	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
_	Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment		2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst	•			
_	Did the organization have unrelated business gross income of \$1,000 or more during the year	?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature of		İ		
	over, a financial account in a foreign country (such as a bank account, securities account, o	or other financial			
	account)?		4a		X
ь	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finance				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax		5a		_X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte		5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,0				
	organization solicit any contributions that were not tax deductible as charitable contributions'		6a		_X
b	If "Yes," did the organization include with every solicitation an express statement that such	contributions or			
_	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly for goods			
	and services provided to the payor?		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property to the first section of th	or which it was			
	required to file Form 8282?		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal because of the organization receive any funds, directly or indirectly, to pay premiums on a personal because of the organization receive any funds, directly or indirectly, to pay premiums on a personal because of the organization receive any funds, directly or indirectly, to pay premiums on a personal because of the organization receive any funds, directly or indirectly, to pay premiums on a personal because of the organization receive any funds, directly or indirectly, to pay premiums on a personal because of the organization received any funds.		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form	•	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a	•			
	organizations. Did the supporting organization, or a donor advised fund maintained by	y a sponsoring			
_	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
_	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	اما			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	امدا			
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	445			
40-		11b	4.2		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12a	_	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
ь	Note. See the instructions for additional information the organization must report on Schedul Enter the amount of reserves the organization is required to maintain by the states in which	e U.			
U	the organization is licensed to issue qualified health plans	1405			

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

c Enter the amount of reserves on hand

14a

14b

13c

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	ons.
	Check if Schedule O contains a response to any question in this Part VI			. X
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6	<u> </u>	٠, ,	<i>in</i> :
	If there are material differences in voting rights among members of the governing body, or	, ,	, ,	3
	if the governing body delegated broad authority to an executive committee or similar		( ) }	4
	committee, explain in Schedule O.	·	2 KM	
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 4	\		11/2/12
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	<u>  `                                   </u>	S	
	any other officer, director, trustee, or key employee?	2	<u>X</u> _	<del></del>
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 7a	Did the organization have members or stockholders?	6	<u>X</u>	<del> </del>
/a	one or more members of the governing body?	<b>.</b>	3.7	
_	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a	<u>X</u>	<del> </del>
b	stockholders, or persons other than the governing body?		37	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b	X	$\vdash$
•	the year by the following:	, ,		
_	The governing body?	8a	V	3.5
a b	Each committee with authority to act on behalf of the governing body?	8b	X	<del>                                     </del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	60	<u> </u>	<del>                                     </del>
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven		nde l	1 22
	, , , , , , , , , , , , , , , , , , , ,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such 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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	\$ 55.55	1	1.3
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	数	1	\$ % 2.5
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1-10	
а	The organization's CEO, Executive Director, or top management official	15a		X
Ь	Other officers or key employees of the organization	15b	. 71 - 5-2	X
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		12	* 1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
	· · · · · · · · · · · · · · · · · · ·	16a	N Police	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			种·乐·
	organization's exempt status with respect to such arrangements?		(A. 16. )	Anna Act
Section	on C. Disclosure	16b	Ь	Ь
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 (Section	n 501	(c)(3)	onlv)
•	available for public inspection. Indicate how you made these available. Check all that apply.	551	حرب ر	. Unity)
	☐ Own website ☐ Another's website ☒ Upon request ☒ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	of inte	rest r	olicv
	and financial statements available to the public during the tax year.			-,,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	)	
	organization: ► Marilyn Loux 101 West Mount Royal Avenue Baltimore, MD 21201 410-727-4828			

Form	aan	(2012)	
PUILIT	990	120121	

Form 990 (2012)

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

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

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

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

☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any currer	it officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office individua	unles	Pos neck ss pe	rson	e than of the state of the stat	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
				_		8				
(1) Yehuda Neuberger	1.5					l				
President and Donor Director	ļ	X	<u> </u>	X		<u> </u>	<u> </u>	0	0	0
(2) Anne Neuberger	1.5							<u> </u>		
Vice President and Donor Director	<del> </del> _	X	<u> </u>	X		<u> </u>		0	0	0
(3) Marc B. Ternil	1.5	,,				]	]	] _		<b>A.</b>
Secretary/Treasurer and Public Director	37.5	X	├—	X		<u> </u>	_	0	522,892	35,974
(4) Genine Macks Fidler	1.5	3.7				]		1		•
Public Director	1.5	X	┣-	-	<u> </u>	<u> </u>	_	0	0	0
(5) Laurence Katz Public Director	1.5	X								0
(6) Bruce Sholk	1.5	<u> </u>	-	$\vdash$			-	0	0	0
Public Director	1.3	X		ļ					ا	0
	<del> </del> -		┢	-	├	├─	├	0	<del>                                     </del>	
.(7)	<del> </del>	}			1					
(8)			-							
(9)	<del> </del>		i			 	-			
(10)							<del>                                     </del>			
(11)										
(12)	ļ									
(13)					-		-			
(14)					-	-				

	(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box, i office or dire	unles	Pos eck s pe	rson	than the strain Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	C	from organi and re	nated unt of ner nsation the zation	1
		inter	stee	rustee		ð	pensated					nganiz	auons	_
(15)														
(16)														
(17)														
(18)									<u> </u>		ļ			
(19)						_		_			-			
(20)							_							
(21)											<u> </u>			
(22)						_		_			<u> </u>			
(23)				_							<u> </u>			
								_						
(24)														
(25)														
1b c d	Sub-total	VII, Sectio		-	-		•	<b>&gt; &gt;</b>	0	522,892 522,892				5,974 5,974
2	Total number of individuals (including but reportable compensation from the organi	not limited		ose	list	ed	above	e) w	<del></del>			<u>-</u>		<u> </u>
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8	ficer, direc	tor, c	or tr	uste	<del>-</del> e,	key e	emp	oloyee, or high	est compensat		3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations individual										he		x	,
5	Did any person listed on line 1a receive of for services rendered to the organization									ration or individ	ual	5		X
Section	on B. Independent Contractors					_								
1	Complete this table for your five highest compensation from the organization. Repyear.												n's ta	ax
None	(A) Name and business add	iress							(B) Description of s	ervices	Com	(C) pensa	ition	
											_			
						_								
2	Total number of independent contractor received more than \$100,000 of compens							tr	nose listed ab	ove) who				
				و								Form	990	7201

Part	VIII	Statement of Revenue Check if Schedule O contains a response to any ques	stion in this Part V	/III		
***	,		(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	Federated campaigns 1a  Membership dues 1b	<i>'</i>		22	
S W	C	Fundraising events 1c	1			,
ar /	d	Related organizations 1d	1 "			
IS, C	е	Government grants (contributions) 1e	1	ź		,
tion r S	f	All other contributions, gifts, grants,	] '	<i>•</i>	2 2	) í
ib di		and similar amounts not included above 1f 220,000	<u> </u>			
do	g	Noncash contributions included in lines 1a-1f: \$		,		) "Y"
	h	Total. Add lines 1a–1f ▶	220,000	<u> </u>	<u> </u>	
Program Service Revenue		Business Code				3
eve	2a		<u> </u>			<del> </del>
ě	b		<del>  </del>		ļ	<del> </del>
Š	C				ļ	ļ
Se	d		<del> </del>			ļ
ram	е				ļ.—	
og	f	All other program service revenue .			L	<u></u>
<u> </u>	g	Total. Add lines 2a-2f	0		T	<u> </u>
	3	Investment income (including dividends, interest, and other similar amounts)	11.00			100 (0)
-		Income from investment of tax-exempt bond proceeds	11,606		ļ	100,600
	4	· · · · · · · · · · · · · · · · · · ·	ļ	<del></del>	<del> </del>	<del> </del>
	5	Royalties			<del> </del>	
	6-	<u>~_</u>	-			
	6a	Gross rents	-			
	b	Less: rental expenses  Rental income or (loss)  0				
	2					<del></del>
	d 7a	Gross amount from sales of (i) Securities (ii) Other	<u> </u>		-	
	70	assets other than inventory 652	- 1			
	b	Less: cost or other basis and sales expenses .				
	_	Gain or (loss)	-		ļ	
	٠ د		<del></del>		<u> </u>	(5)
	d	Net gain or (loss)	652	<del></del>	<del> </del>	652
Other Revenue	8a	Gross income from fundraising events (not including \$				
er Re		of contributions reported on line 1c). See Part IV, line 18 a				
ᡖ		Less: direct expenses b				
		Net income or (loss) from fundraising events	0			
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a	4 1		l.	
		Less: direct expenses b	<del>                                     </del>		<del> </del>	<del> </del>
		Net income or (loss) from gaming activities	0		<u> </u>	<del> </del>
		Gross sales of inventory, less returns and allowances a				
		Less: cost of goods sold b	<b> </b>		<del> </del>	<del> </del>
	С	Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code	0		ļ	<del> </del>
	44-	MISCERIALIEUUS PREVENUE BUSINESS CODE	<del> </del>		<del> </del>	<del>                                     </del>
ł	11a		<del>                                     </del>		<del>                                     </del>	<del> </del>
	b		<del> </del>		<del> </del>	<del> </del>
	0	All other revenue	<del> </del>		<del> </del>	<del> </del>
	d	All other revenue			<del>                                     </del>	<del> </del>
	е 12	Total revenue. See instructions.	232,258		<del> </del>	101 250
	<u></u>	Tom. revenue. cos mandenons	434,438		1	Form <b>990</b> (2012

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all	umns. All other organizations must complete column (A).
---	---

	Check if Schedule O contains a respon	se to any question	in this Part IX		🛚
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	375,000	375,000	4 4	. %
2	Grants and other assistance to individuals in the United States. See Part IV, line 22			, , , ,	, ,
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16			٠	
<b>4</b> <b>5</b>	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10 11	Other employee benefits				
a b c	Management				
d e f	Lobbying	2,281		2,281	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 13 14 15 16 17	Advertising and promotion				
19 20	for any federal, state, or local public officials  Conferences, conventions, and meetings Interest				
21 22 23	Payments to affiliates				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b c					
d e 25	All other expenses Miscellaneous  Total functional expenses. Add lines 1 through 24e	52 377,333	375,000	52 2,333	<del></del>
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  if following SOP 98-2 (ASC 958-720) if				
					Form <b>990</b> (2012)

P	art 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
	1	Cash-non-interest-bearing			1	
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and trustees, key employees, and highest co-Complete Part II of Schedule L	•		5	
ts	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), as sponsoning organizations of section 501(c)(9) volur organizations (see instructions). Complete Part II of Sche	nd contributing employers and intary employees' beneficiary		6	· 10
Assets	7	Notes and loans receivable, net			7	
¥	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	  10a			
	ь	Less: accumulated depreciation	10b	Service of the servic	10c	0
	11				11	<del></del>
	12	Investments - other securities. See Part IV, line		605,504	12	489,172
	13	Investments-program-related. See Part IV, line		, , , , , , , , , , , , , , , , , , , ,	13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		_	15	
	16	Total assets. Add lines 1 through 15 (must equal		605,504	16	489,172
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete	Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and for trustees, key employees, highest comper disqualified persons. Complete Part II of Schedu	sated employees, and		22	
Lia	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	payables to related third s 17-24). Complete Part X		25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
98		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 and	B), check here▶ 🔲 and			
a	27	Unrestricted net assets		605,504	27	489,172
Bal	28	Temporarily restricted net assets			28	
פַ	29	Permanently restricted net assets			29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 9 complete lines 30 through 34.	58), check here ► ☐ and			
2	30	Capital stock or trust principal, or current funds			30	
Net Assets	31	Paid-in or capital surplus, or land, building, or e			31	
As	32	Retained earnings, endowment, accumulated in	come, or other funds .		32	
Zet Et	33	Total net assets or fund balances		605,504	33	489,172
_	34	Total liabilities and net assets/fund balances .	<u> </u>	605,504	34	489,172
						Form <b>990</b> (2012)

Page	1	2

		_			9c • =
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	. <u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)			23	2,258
2	Total expenses (must equal Part IX, column (A), line 25)	!		37	7,333
3	Revenue less expenses. Subtract line 2 from line 1			(14	5,075)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	·		60	5,504
5	Net unrealized gains (losses) on investments			2	8,743
6	Donated services and use of facilities	· ]			0
7	Investment expenses				0
8	Prior period adjustments				0
9	Other changes in net assets or fund balances (explain in Schedule O)				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	ן ס		48	9,172
<u>Part</u>	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u></u>	<u>.</u> .	<u></u>	
				Yes	No
1	Accounting method used to prepare the Form 990: 🖾 Cash 🔲 Accrual 🔲 Other	[			
	If the organization changed its method of accounting from a prior year or checked "Other," explain	n in	ļ		-
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	d or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Ĺ			
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 of	on a			
	separate basis, consolidated basis, or both:				1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	<u></u>			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs				
	of the audit, review, or compilation of its financial statements and selection of an independent accounta	L_	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	in in			
	Schedule O.	[_			
3a		th in			
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit	ts	3b		
			Form	990	(2012)

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

# **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
2012
Open to Public

Open to Publ Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Vahuda & Anna Nauhargar Foundation In

Employer identification number

(ehu	ıda & Anne Neube	erger Foundation	Inc.		_			7-10 <u>4079</u>	6			_
Pa	ttl Reason f	or Public Chai	rity Status (All orga	nization	s must c	omplete	this par	t.) See i	nstruction	ons.		
he (	organization is not	a private founda	ation because it is: (Fo	or lines 1 t	hrough 1	1, check	only one	box.)	•			
1			hes, or association of			ed in <b>sec</b> f	tion 170(	b)(1)(A)(i)	).			
2			170(b)(1)(A)(ii). (Attac		•							
3			spital service organiza									
4			on operated in conjun	ction with	a hospit	al descrit	oed in <b>se</b>	ction 170	(b)(1)(A)	(iii). Ente	r the	
_	· ·	ne, city, and stat		·	<del>-</del>		<u>-</u>					;
5	section 170(b	)(1)(A)(iv). (Com	•	_			•	, ,	vernmen	tal unit c	lescrib	ed in
6 7	☐ An organization	on that normally	nment or government receives a substantia (A)(vi). (Complete Pai	al part of					nit or fror	n the ge	neral p	oublic
8			n section 170(b)(1)(A)		nplete Pa	art II.)						
9	An organization receipts from support from	on that normally activities related gross investme	receives: (1) more that to its exempt functent income and unreafter June 30, 1975. So	an 331/3% ions—sul lated bus	of its su oject to d siness ta	upport fro certain ex xable inc	ceptions ome (les	s, and (2) ss section	no mor	e than 3	31/3%	of its
10	☐ An organization	on organized and	l operated exclusively	to test fo	r public s	safety. Se	e <b>sectio</b>	n 509(a)(	4).			
11	purposes of o	one or more pub	nd operated exclusive blicly supported organ describes the type of	nizations	describe	d in secti	ion <sup>-</sup> 509(a	1)(1) or se	ection 50	9(a)(2). S		
	a 🛚 Type I	b 🗌 Type	li c ☐ Type II	I-Functio	nally inte	grated	d 🗌	Type III-	Non-fund	ctionally i	ntegra	ted
е		ındation manage	that the organization ers and other than on									
f	If the organiz	ation received a	a written determination			that it is	а Туре	I, Type i	li, or Typ	oe III su	portir	ng
	-	check this box .								• •		$\boxtimes$
g	following pers	ons?	he organization accep					-				
			ndirectly controls, eitlody of the supported						din (ii) a	nd 11g(i	Yes	No X
	(ii) A family m	ember of a perso	on described in (i) abo	ve?						11g(ii	)	X
	(iii) A 35% co	ntrolled entity of	a person described in	i) or (ii) a	above? .					11g(ii	1	X
h	Provide the fo	llowing informati	on about the support	ed organi	zation(s).							
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	m col. (i) lis	rganization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the tion in col zed in the S?	(vii) Amou s	int of mo	onetary
				Yes	No	Yes	No	Yes	No	<u>l_</u>		
A) T	he Associated: Jewish									1		
<u>'c</u>	ommunity Fed Balto	52-0607957	99	X		X	<u></u>	X	<u> </u>		19	0,000
В)												
C)												
D)												
E)												
ota	<u> </u>									ł	19	90,000

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

Part II

_	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support	quality unde	a the tests ha	ited below, p	lease comple	te Part III.)	
	dar year (or fiscal year beginning 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.")		(4) 2000	(4)20.0	(4)	(0,20.2	(i) rotal
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		,				
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support						
	dar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4				ļ. <del></del>		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10	····		······			
12	Gross receipts from related activities, etc.	-	•			12	
13	First five years. If the Form 990 is for th						
<del></del>	organization, check this box and stop her	<u>re</u>	<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>	<u></u>	<u> </u>	· · <b>&gt;</b> 🗆
	on C. Computation of Public Suppor			4 1 (0)			
14 15	Public support percentage for 2012 (line 6 Public support percentage from 2011 Sch		•			15	<u>%</u> %
16a	331/3% support test—2012. If the organiz						
	box and stop here. The organization qual						
b	331/3% support test-2011. If the organ	ization did no	ot check a box	c on line 13 or	r 16a, and line	15 is 33 <sup>1</sup> /3%	
	check this box and stop here. The organi	zation qualifie	s as a publicly	supported org	ganization .		. ▶ 🗆
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ets the "facts- acts-and-circ	and-circumsta	nces" test, che st. The organiz	eck this box ar ation qualifies	nd stop here. I	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization measurement of the organization measurement of the organization measurement.	ion meets the eets the	e "facts-and-ci s-and-circums	rcumstances" tances" test. 1	test, check the organization	his box and st	op here. a publicly
40	supported organization						· · <b>-</b> 🗅
18	Private foundation. If the organization di instructions						

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

## 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.)

					7717	<del>···/</del>	
	on A. Public Support						
_	dar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the		<b> </b>	I	I		
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the		ĺ.				
	organization's benefit and either paid		,				
	to or expended on its behalf		<u></u>				
5	The value of services or facilities		İ				
	furnished by a governmental unit to the		ľ				
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000					1	
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		,	•			
	line 6.)		<u> </u>				
	on B. Total Support			<del>,</del>			
Calen	dar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	· · · · · · · · · · · · · · · · ·						
	payments received on securities loans, rents,						-
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses	ļ	ļ		ļ	1	1
	acquired after June 30, 1975						
	Add lines 10a and 10b		<u> </u>				
11	Net income from unrelated business			Ì	1	Í	
	activities not included in line 10b, whether		ļ				
	or not the business is regularly carried on						
12	Other income. Do not include gain or				İ		
	loss from the sale of capital assets						
	(Explain in Part IV.)	ļ	<del> </del>	ļ	<b> </b>	\	
13	Total support. (Add lines 9, 10c, 11, and 12)						
4.4	and 12.)			1 41 1 1 1 1			504(-)(0)
14	First five years. If the Form 990 is for the	-			•		
Coot!	organization, check this box and stop he		· · · · ·	<del></del>	<del></del>	· · · · ·	
	on C. Computation of Public Support			10 (0)		145	
15	Public support percentage for 2012 (line						<u>%</u>
16 Socti	Public support percentage from 2011 Sci on D. Computation of Investment In			<del></del>	<del></del>	16	%
	Investment income percentage for 2012 (			v lino 12 police	mp (fl)	147	
17 19	Investment income percentage for 2012 ( Investment income percentage from 201)						<u>%</u>
18	33¹a% support tests—2012. If the organ	•	•				% and line
19a	17 is not more than 331/3%, check this box						
ь	331s% support tests—2011. If the organiz						
Đ	line 18 is not more than 331/2%, check this						
20	Private foundation. If the organization d						
			237 017 1110 14	, .04, 01 100,	CHECK THIS DOX	and see ment	

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

## **Political Campaign and Lobbying Activities**

irotions Evernt From Income Tay Under section 504(s) and section 527

2012

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- · Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B.

• <u>S</u> Name	<del>-</del>	" to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
Name	action E01(a)(A) (E) as (E) asas	· · · · · · · · · · · · · · · · · · ·			
	of organization	anizations Complete Part III		I Employer ide	maification number
	•			' '	ntification number
	la & Anne Neuberger Four			27-1040796	
		e organization is exempt und			organization.
1		the organization's direct and indire			•
2					D 
3	volunteer nours				
Part	I-B Complete if th	e organization is exempt und	er section 501/	-1/31	
1		excise tax incurred by the organiz		n 4955 🕨 :	<del></del>
2	•	excise tax incurred by organization		section 4955	\$ \$
3		ed a section 4955 tax, did it file Fo	_	0000011 1000	·
4a	Was a correction made?		-		Yes No
þ	If "Yes," describe in Part				
Part		e organization is exempt und	er section 501(	c), except section 501	I(c)(3).
1		ly expended by the filing organia			<u> </u>
	activities				5
2	Enter the amount of the	filing organization's funds contrib	outed to other org	anizations for section	
		vities			\$
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	***************************************
					•
4	Did the filing organization	n file Form 1120-POL for this year	?		Yes No
5		ses and employer identification nu		ection 527 political organ	izations to which the filing
	organization made payme	ents. For each organization listed,			
	the amount of political co	•	enter the amount	paid from the filing organ	ization's funds. Also enter
		ontributions received that were pro	mptly and directly	paid from the filing organ delivered to a separate [	ization's funds. Also enter political organization, such
		ontributions received that were profund or a political action committed	mptly and directly	paid from the filing organ delivered to a separate [	ization's funds. Also enter political organization, such
		ontributions received that were pro	mptly and directly	paid from the filing organ delivered to a separate paid space is needed, proving (d) Amount paid from	nization's funds. Also enter political organization, such vide information in Part IV.
	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	nization's funds. Also enter political organization, such vide information in Part IV.  (e) Amount of political contributions received and
	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate paid space is needed, proving (d) Amount paid from	control of points and description of the property of the property of the property of the promptly and directly delivered to a separate
	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
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(1)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If
(2)	as a separate segregated	ontributions received that were pro fund or a political action committe	mptly and directly ee (PAC). If additio	paid from the filing organ delivered to a separate pail space is needed, prov (d) Amount paid from filing organization's	control of political organization, such product organization, such product of political contributions received and promptly and directly delivered to a separate political organization. If

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

SCHOOL	due C (1 01111 390 01 390-LZ) 2012					Page Z
Par	t II-A Complete if the organization section 501(h)).	is exempt	under section 50	11(c)(3) and file	d Form 5768 (elec	
A	Check ► ☐ if the filing organization beloname, address, EIN, expen	ongs to an a ses, and sha	iffiliated group (ar	nd list in Part IV o	each affiliated gro	up member's
в (	Check ► ☐ If the filing organization che	cked box A	and "limited conf	rol" provisions a	npply.	
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" me			)	organization's totals	group totals
1a	Total lobbying expenditures to influence	oublic opinior	grass roots lobby	ing)	75,000	0
Ł	Total lobbying expenditures to influence	a legislative b	ody (direct lobbying	3)		
C	: Total lobbying expenditures (add lines 1a	and 1b) .			75,000	0
c	Other exempt purpose expenditures .				300,000	
e	Total exempt purpose expenditures (add	lines 1c and	1d)		375,000	0
f	Lobbying nontaxable amount. Enter t	he amount t	from the following	table in both		
	columns.				75,000	0
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		1
	Not over \$500,000	20% of the a	mount on line 1e			7
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000	1	1
	Over \$17,000,000	\$1,000,000			]	
	Grassroots nontaxable amount (enter 25%	% of line 1f)			18,750	0
r	Subtract line 1g from line 1a. If zero or les	ss, enter -0-			56,250	0
i	Subtract line 1f from line 1c. If zero or les	s, enter -0-			0	0
j	If there is an amount other than zero		th or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year?			<u> </u>	· · · · · ·	Yes No
	(Some organizations that made columns below. S	de a section see the instru	ctions for lines 2a	not have to com through 2f on pa		
	Lobbying	Expenditures	s During 4-Year Av	eraging Period	<del></del>	<del></del>
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	(e) Total
2a	Lobbying nontaxable amount		0	0	75,000	75,000
b	Lobbying ceiling amount (150% of line 2a, column (e))					112,500
	Total lobbying expenditures		0	0	75,000	75,000
d	Grassroots nontaxable amount		0	0	18,750	18,750

0

0

Schedule C (Form 990 or 990-EZ) 2012

75,000

28,125

75,000

Schedule C (Form 990 or 990-EZ) 2012

Part	I-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed (election under section 501(h)).	d I	Form	576	В	
For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	)		(b)	
	lobbying activity.	s	No		Amoun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local	1				
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					,
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				·	,
С	Media advertisements?	_		_		
d	Mailings to members, legislators, or the public?	4				
е	Publications, or published or broadcast statements?	4				
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	$\dashv$		_		
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	$\dashv$				
; ;	Other activities?	$\dashv$				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	_				
Part		), C	or se	ction	,	
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	—	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		+
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)			3		<u></u>
T WIT	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b answered "Yes."					3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	f				
а	Current year	-	2a			
b	Carryover from last year	1	2b_			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3_			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?					
5	Taxable amount of lobbying and political expenditures (see instructions)		5	-		
Part				J		
Comp	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part o, complete this part for any additional information.	t II	l-A; a	nd Pa	rt II-B	, line
					<del></del>	
						<del></del>

### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

**Employer identification number** 

Par		7-1040796
للنجيد	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) .	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	
	funds are the organization's property, subject to the organization's exclusive legal control?	· · · · · · □ Yes □ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for	
	conferring impermissible private benefit?	· · · · · · 🔲 Yes 🔲 No
Par	Conservation Easements. Complete if the organization answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a	n 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.	
		Held at the End of the Tax Year
а	Total number of conservation easements	. 2a
b	Total acreage restricted by conservation easements	. 2b
С	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on	
	historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or termin	
	tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspe	ection, handling of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ea	asements during the year
	•	•
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easem	ents during the year
	<b>▶</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	
	(i) and section 170(h)(4)(B)(ii)?	· · · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports conservation easements in its revenue at	nd expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's finan	
	organization's accounting for conservation easements.	
	Organizations Maintaining Collections of Art, Historical Treasures, or O	<u>A.</u> .
Part		mer Similar Assets.
Part	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	ther Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	evenue statement and balance shee
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re	evenue statement and balance shee cation, or research in furtherance o
1a	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide, in Part XIII, the text of the footnote to its financial statements that of	evenue statement and balance shee cation, or research in furtherance of lescribes these items.
1a	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide, in Part XIII, the text of the footnote to its financial statements that of the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re-	evenue statement and balance shee cation, or research in furtherance of describes these items. venue statement and balance shee
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1a	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide, in Part XIII, the text of the footnote to its financial statements that of the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1	evenue statement and balance sheet cation, or research in furtherance of describes these items.  I venue statement and balance sheet cation, or research in furtherance of the cation is seen to be seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation is seen the cation in furtherance of the cation is seen the cation is seen the cation in furtherance of the cation is seen the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in furtherance of the cation is seen the cation in the cat
1a b	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide, in Part XIII, the text of the footnote to its financial statements that of the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1	evenue statement and balance shee cation, or research in furtherance of describes these items.  Item to statement and balance shee cation, or research in furtherance of the statement and balance shee cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cation, or research in furtherance of the statement and balance sheet cations are statement and balance sheet cations are statement and balance sheet cations are statement and the st
1a b	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide, in Part XIII, the text of the footnote to its financial statements that of the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1	evenue statement and balance sheer cation, or research in furtherance of describes these items.  I venue statement and balance sheer cation, or research in furtherance of the cation in
b 2 a	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide, in Part XIII, the text of the footnote to its financial statements that of the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educe public service, provide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1	evenue statement and balance sheet cation, or research in furtherance of lescribes these items.  venue statement and balance sheet cation, or research in furtherance of the cation, or research in furtherance of the cation is a session of the cation in the cation is the cation in the cation is the cation in the cation is the cation in the cation in the cation is the cation in the cation in the cation is the cation in the cation in the cation in the cation is the cation in th

Part	III Organizations Maintaining Col	lections of Art, His	storical Treasures	, or Other Similar As:	sets (continued)
3	Using the organization's acquisition, acce	ession, and other reco	ords, check any of th	ne following that are a si	gnificant use of its
	collection items (check all that apply):				
а	☐ Public exhibition	d	☐ Loan or exchang	ge programs	
b	☐ Scholarly research	е			
	☐ Preservation for future generations	•			
4	Provide a description of the organization's	s collections and expl	ain how they further	the organization's exem	not purpose in Part
•	XIII.	o concentration and exp	an now and rando	ino organization o oxon	.p. parpood III i air
5	During the year, did the organization solid	cit or receive donation	ne of art historical t	reseures or other simila	17
•	assets to be sold to raise funds rather than	n to he maintained as	nart of the organizat	ion's collection?	,, 
Dort	V Escrow and Custodial Arrange				
rait	line 9, or reported an amount on			answered res to ro	iiii 990, Fait iv,
40	Is the organization an agent, trustee, cus			tions or other secots no	<del></del>
ıa	included on Form 990, Part X?				
					☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part X	III and complete the t	ollowing table:		
				<del></del>	mount
	Beginning balance			1c	<del></del>
	Additions during the year			1d	
e	Distributions during the year			1e	
f	Ending balance			1f	
	Did the organization include an amount on				
	If "Yes," explain the arrangement in Part X	III. Check here if the e	explanation has been	provided in Part XIII .	<u></u>
Part	V Endowment Funds. Complete it	f the organization a	nswered "Yes" to	Form 990, Part IV, line	10.
	(a)	) Current year (b) Pr	nor year (c) Two yea	rs back (d) Three years back	(e) Four years back
1a	Beginning of year balance				
b	Contributions				
C	Net investment earnings, gains, and				
	losses				
d	Grants or scholarships				
	Other expenditures for facilities and				<del></del>
	programs				
f	Administrative expenses	<del></del>	<del></del>		<del> </del>
	End of year balance		<del></del>		<del> </del>
g 2	Provide the estimated percentage of the c	urrent year and balan	oo (lipo 1a, column /s	-\\ bold co:	
	Board designated or quasi-endowment	urrent year end balan	ce (inte 19, column (a	ajj neiu as.	
a					
		6			
С	Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2c sh	70 			
0-	The percentages in lines 2a, 2b, and 2c sh	iouid equal 100%.			_
Sa	Are there endowment funds not in the post organization by:	ssession of the organ	iization that are neio	and administered for th	
	·				Yes No
	(i) unrelated organizations				3a(i)
	(ii) related organizations				3a(ii)
_	If "Yes" to 3a(ii), are the related organization				3b
4	Describe in Part XIII the intended uses of t			<del></del>	
Part		T	<del></del>	<del>,</del>	
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
С	Leasehold improvements				
ď	Equipment		<del> </del>	<del></del>	
e	Other		1	<del> </del>	
	Add lines 1a through 1e. (Column (d) must	equal Form 990 Part	X. column (B) line 1	0(c).) ▶	<del></del>
	Joolaini (a) mast		, oo.a.m. (D), mie 1	~1~/·/ · · · · · · · · · · · · ·	

Part VII	Investments - Other Securitie	s. See Form 990, Part X, I	ine 12.	r age <b>u</b>
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	
(1) Financia	al derivatives			
(2) Closely-	held equity interests			
(3) Other	· · · · · · · · · · · · · · · · · · ·			
(A) M &	T Bank - Consolidated Investments	2,529	End-of-year market value	
(B) Inves	tment in Limited Partnership	486,643	End-of-year market value	
(C)				
(D)				·
(E)				
(F)	***************************************			
(G)				
(H)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
(1)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Relate		T	
	(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
_(6)				
(7)		<u> </u>		
				<del></del>
_(9)	- <del></del>			
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.)	2		
Part IX	Other Assets. See Form 990, F	(a) Description		(b) Book value
(4)		(a) Description		(b) Book Value
(1)	<del></del>			
(2)			<del></del>	
(4)	<del> </del>			
(5)				
(6)		<del></del>		
(7)	<del></del>			
(8)			<del></del>	
(9)				
(10)	<del></del>			
	umn (b) must equal Form 990, Part X,	col. (B) line 15.)		
Part X	Other Liabilities. See Form 990	0, Part X, line 25.	<del> </del>	
1.	(a) Description of liability	(b) Book value		
(1) Federa	I income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)			)	
(10)			]	
(11)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)	<u> </u>		
2. FIN 48 (A	SC 740) Footnote. In Part XIII, provide th	e text of the footnote to the org	anization's financial statements that re	eports the organization's
liability for u	incertain tax positions under FIN 48 (ASC	740). Check here if the text of	the footnote has been provided in Pa	r <u>t XIII</u>

Part	XI Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per	Return
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:		
а	Net unrealized gains on investments	2a	1
b	Donated services and use of facilities	2b	,
С	Recoveries of prior year grants	2c	•
d		2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	,
b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1.	2.)	5
Part	XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe	er Return
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		Ţ,
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	1 : 1
С	Other losses	2c	1 / 1
d	Other (Describe in Part XIII.)	2d	1 ·
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	5
	XIII Supplemental Information		· · · · · · · · · · · · · · · · · · ·
Part V inform	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9 line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. ation.	9; Part III, lines 1a and 4; P Also complete this part to	Part IV, lines 1b and 2b; o provide any additional

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

► Attach to Form 990.

Open to Public Inspection OMB No 1545-0047 2012

Employer identification number

Yehuda & Anne Neuberger Foundation, Inc.	tion, Inc.					27-1040796	962
Part I General Information on Grants and Assistance	n on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	tain records to subs	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility fo	or the grants or assistance	, and 🖂 Yes 🗆 No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nization's procedure	es for monitoring t	he use of grant fun	ids in the United S	states.		
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	ssistance to Gor	vernments and eceived more the	Organizations i	in the United So	tates. Complete in ted if additional s	f the organization answipace is needed.	and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, re than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Ahavas Yısrael Charity Fund 6400 Cross Country Blvd Baltmore, MD	52-1219478	501(c)(3)	5,000				Operating support
(2) American Israel Public Affairs Committee 2510H Street NW Washington DC	<u>s</u> 53-0217164	501(c)(4)	75,000				Operating support
(3) Bais Yaakov School for Girls 11111 Park Heights Ave Balumore, MD 52-0613700	52-0613700	501(c)(3)	26,000				Operating support
(4) Fisher House Foundation	11-3158401	501(c)(3)	000'5				Operating support
(5) National Conference of Synagogue Your 4001 Clarks Lane Baltimore, MD	<u>t</u> h 52-1071003	501(c)(3)	5,000	÷			Operating support
(6) Ner Israel Rabbinical College 400 Mt. Wilson Lane Pikesville, MD	52-0660881	501(c)(3)	5,000				Operating support
(7) Renee Schick Gemulas Chesed 1472 East 17th Street Brooklyn, NY	<del></del>	501(c)(3)	10,000				Operating support
(8) The Associated 101 West Mt. Royal Ave Baltmore, MD	52-0607957	501(c)(3)	190,000				Operating support
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1 501(c)(3) and gov	ernment organiza	tions listed in the lir	ne 1 table .			∞ °
3 Enter total number of other organizations listed in the line 1 table	organizations listed	in the line 1 table					0
For Paperwork Reduction Act Notice, see the Instructions for Form 990	see the Instructions	for Form 990.					Schedule I (Form 990) (2012

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV, appraisal, other) The Foundation will request and receive periodic reports and updates from the grantees regarding how grants are utilized, (d) Amount of non-cash assistance Grants are reviewed to ensure that they are permissible and in accord with applicable laws and regulations. (c) Amount of cash grant and takes such information into account in considering future grant awards. Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance information. Part IV ~ က 4 2 9

### **SCHEDULE J** (Form 990)

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Yehuda & Anne Neuberger Foundation, Inc.

**Employer identification number** 

27-1040796

Part	Questions Regarding Compensation				
_ 1a	Check the appropriate box(es) if the organization pro	ovided any of the following to or for a person listed in Form		Yes	No
		provide any relevant information regarding these items.	`		
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use			
	☐ Travel for companions	☐ Payments for business use of personal residence			4
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		1	4
	☐ Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the	ne organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expexplain	penses described above? If "No," complete Part III to	4		
2	•	reimbursing or allowing expenses incurred by all officers,	1b		
	directors, trustees, and the CEO/Executive Director	r, regarding the items checked in line 1a?	2		<del></del>
3		anization used to establish the compensation of the nat apply. Do not check any boxes for methods used by a he CEO/Executive Director, but explain in Part III.			,
	☐ Compensation committee	☐ Written employment contract			
	☐ Independent compensation consultant	☐ Compensation survey or study			
	Form 990 of other organizations	☐ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, organization or a related organization:	Part VII, Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-contro	l payment?	4a		X
b	Participate in, or receive payment from, a supplement	ental nonqualified retirement plan?	4b	X	
C	Participate in, or receive payment from, an equity-b	pased compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide the applicable amounts for each item in Part III.			
5	Only section 501(c)(3) and 501(c)(4) organization For persons listed in Form 990, Part VII, Section A,				
	compensation contingent on the revenues of:				
a	The organization?	•	5a		<u>X</u>
Ь	Any related organization?		5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	line de aliable appaiantia anno anno anno anno anno anno anno an			
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of:	line 1a, did the organization pay or accrue any			
а	The organization?		6a		X
b	Any related organization?		6b		X
	If "Yes" to line 6a or 6b, describe in Part III.				
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes."	n A, line 1a, did the organization provide any non-fixed describe in Part III	7		v
8		paid or accrued pursuant to a contract that was subject			X
-		Regulations section 53.4958-4(a)(3)? If "Yes," describe			
			8		X
9		low the rebuttable presumption procedure described in			^
			ا م		

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

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)(i)—(iii) for each listed individual must equal the total amount of Form 990. Part VII. Section A line 1a applicable columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990. Part VII.

Note: The Sum of Columns (B)(I)—(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	or eac	n listed individual mu	ust equal the total amo	ount of Form 990, Par	rt VII, Section A, line	la, applicable colum	in (D) and (E) amount	s for that individual.
		(b) Breakdown (	(b) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	oldexetook (D)	(E) Total of columns	
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(a)-(l)(a)	(F) Compensation reported as deferred in prior Form 990
	ε							
1 Marc B. Ternll	(11)	437,364	75,000	10,529	10.000	28.019	560 912	
	(i)							
2	(II)							
	(2)							
3	<b>(E)</b>	9 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	+					
	8							
4	€	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	€							
5	€		-		1 4 4 6 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		1	
	(1)							
8	€		**************************************					
	€							
7	8		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	€							
8	<b>(E)</b>							
	(1)							
6	(1)							
	(3)							
10	€							
	8							
11	€							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	€							
12	€							
	€							
13	€							1   0   0   0   0   0   0   0   0   0
	<u> </u>							
14	€							0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	<u> </u>							
15	€							
	<b>=</b>							
18	€							

Schedule J (Form 990) 2012

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
The Directors of the Yehuda & Anne Neuberger Foundation, Inc. receive no compensation for their services. However one
of the Directors is employed by the supported entity, The Associated: Jewish Community Federation of Baltimore, Inc. (The Associated).
All of the compensation and benefits listed are paid by The Associated, none of it is attributed to the service as a Director
and/or Officer of the Foundation.
Part 1, Lune 4b -Payments to/from Supplemental Nonqualified Retirement Plans:
Marc B. Terrill - 0
All contributions are into the retirement plan of the supported entity, The Associated. The contributions are at the discretion of the participant.
The Associated makes no contributions on behalf of the individual. Withdrawls are also made at the discretion of the participant. Upon leaving
employment with The Associated, the participant must either take a full distribution or transfer the account to another custodian.
Schedule J (Form 990) 2012

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

Department of the Treasury Internal Revenue Service

Name of the organization

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

Yehuda & Anne Neuberger Foundation, Inc.	27-1040796
Form 990 Part VI, Section A,	
Line 2 - There are family relationships among the Donor Members and Directors. Yeh	uda Neuberger and Anne Neuberger
have a family relationship.	
Line 6 - The organization has two members, a Public Member- The Associated: Jewish	Community Federation of
Baltimore, Inc. and Donor Members consisting of Yehuda Neuberger and Anne Neuberge	г.
Line 7a - The members appoint the Board of Directors. The Public Member appoints t	he majority and the
Donor Members appoint the remainder.	
Line 7b - Amendments to the Bylaws must be ratified by the Member before they are ac	dopted.
Line 11a - The Form 990 and supporting schedules are distributed to the officers and di	rectors upon
completion for review prior to filing.	
Form 990 Part VI, Section B,	
Line 12c - The supported organization monitors and enforces compliance of the conflic	ct of interest policy
by regularly reviewing the Board of Directors, its actions and the investment of assets to er	sure that it complies
with the conflict of interest policy of The Associated.	
Line 19 - The organization makes its governing documents, conflict of interest policy ar	nd financial statements
available to the public upon request. Filings made to the Internal Revenue Service relating	to Form 990 and related schedules
can also be found on www.guidestar.org.	
Form 990 Part IX, Line 24a All other expenses,	
Bank fees - \$51	
Other investment expense - \$1	
	•••••••••••••••••••••••••••••••••••••••
·····	

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

Related Organizations and Unrelated Partnerships ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

nstructions.
separate i
<b>₽</b> See
orm 990.
ttach to F

Open to Public 2012

OMB No 1545-0047

Inspection ~

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity ž Employer Identification number × Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f)
Direct controlling
entity 27-1040796 (e) End-of-year assets Y/Y (e)
Public chanty status
(if section 501(c)(3)) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income 6 (d) Exempt Code section (c) Legal domicile (state or foreign country) 501(c)(3) (c)
Legal domicile (state
or foreign country) ð (b) Primary activity (b) Primary activity Fundraising (1) The Associated: Jewish Community Federation of Baltmore, Inc. 101 W. Mt. Royal Avenue Baltimore, MD 21201 (a) Name, address, and EIN (if applicable) of disregarded entity (a)Name, address, and EIN of related organization Yehuda & Anne Neuberger Foundation, Inc (9) Partl Part II 8 3 € (2) E 2 (4) 0 3

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Schedule R (Form 990) 2012

Schedule R (Form 990) 2012

(k) Percentage (i) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2012 ownership ŝ Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Yes Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line because it had one or more related organizations treated as a partnership during the tax year.) (I) General or ŝ managing partner? (h) Percentage ownership Yes amount in box 20 of Schedule K-1 (i) Code V—UBI (g)
Share of
end-of-year assets (Form 1065) (h) Disproportionate Yes No allocations? (f) Share of total Income (g) Share of end-ofyear assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total Income (d) | Direct controlling | entity (a)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (c)
Legal domicile
(state or foreign country) (d)
| Direct controlling | entity Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity (a) Name, address, and EIN of related organization N/A (9) (a) Name, address, and EIN of related organization (4) ω A/N (1) Part III Part IV 8 <u>ල</u> 9 8 8 9 € 9 9

Schedule R (Form 990) 2012

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

Ž	Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.					20 X
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	r more related orgar	nizations listed in Pari	ts II–IV?		_=
Φ.					1a	×
Ω					<b>1</b>	×
ပ					9	×
ס	Loans or loan guarantees to or for related organization(s)				3	>
0	Loans or loan guarantees by related organization(s)		• · ·		2 4	<b>∢ &gt;</b>
			•		2	<b>4</b>
•	Dividends from related organization(s)	•			÷	Þ
0.	Sale of assets to related organization(s)	•	•		= ;	<b>4</b> ;
ء د	Purchase of assets from related organization(s)	•			5	< :
-	Exchange of assets with related organization(s)	•			=	×
	Losso of facilities an incomment or other property and property of the contract of the contrac				=	×
-	Lease of facilities, equipment, of other assets to related organization(s)				=	×
د	signature of the state of the s					
۷.	Lease of Jacinities, equipment, of other assets from related organization(s)				¥	X
_ '					=	X
E					Ę	×
<b>=</b>	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				두	×
0	Sharing of paid employees with related organization(s)				9	×
<u>α</u>	Reimbursement paid to related organization(s) for expenses				<del>1</del>	×
σ	Reimbursement paid by related organization(s) for expenses				19	×
1						
_	Other transfer of cash or property to related organization(s)				<b>1</b>	×
<b>σ</b>	Other transfer of cash or property from related organization(s)				1s	×
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	nplete this line, inclu	ding covered relation	nships and transaction	on thres	holds.
	(6)	3	3	1		
	Name of other organization	Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	g amount i	nvolveď
€						
(2)						
9						
;						
€						
(2)						
(9)						
				Schedule R (Form 990) 2012	Rorm 9	90) 2012

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

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

Name, address, and EIN of entity  Name,	
section 501(c)(3) granizations?	
wity Legal domicile F (state or foreign unrecountry) unrestrictions	
(1) Primary activity (2) (2) (3)	