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# Form **990**

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	For the 2	012 calen	dar year, or tax	year begin	nning		, 20	012, and endi	ng		,	
В	Check if app	licable	С							D Employer lo	dentification N	umber
	Address	s change	JEWISH CO	MMUNITY	FOUNDA'	TION OF	THE WE	EST		68-04	45835	
	Name o	hange	2014 CAPI							E Telephone		
	Initial re	eturn	SACRAMENT	O, CA 9	5811					916-4	41-1613	
	Termina		ļ									
	$\vdash$	ed return			G Gross recei	Gross receipts \$ 1,005,202						
	H	tion pending	F Name and add	ess of principa	al officer			·	H(a) Is this	a group return for		Yes X No
	, трриос	den penang	SAME AS C						1	affiliates includer attach a list (see		Yes No
$\overline{}$	Tax-exem	nt status	X 501(c)(3)	501(c) (	) (	nsert no )	4947(a)(1	1) or 527	If 'No,'	attach a list (see	e instructions)	
<u>;</u>	Website	•	W.JCFWEST		, (	1113611110)	<del>131/(a)(</del>	17 01 327	LIKes Crown	exemption numbe	<b>&gt;</b>	
<del>K</del>		rganization	X Corporation	Trust	T Assessation 1	Other ►		L Year of Form			· · · · · · · · · · · · · · · · · · ·	
				Trust	Association	Otner		L Year of Form	ation ZUU	J IN State	of legal domic	cile CA
Ра		Summar	<b>'y</b> ibe the organiza	tion's miss	uon or most	cianificant	activities	mo pron		OUTDE II	OT D 143	WA CE
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<u>8</u>	AT	MTNT21	<u> ER AND EXI</u>	FIND PK	OPEKII A	สมัก นิกเท	DP FOK	CHARTIAB	TF LOKE	<u> </u>		
Governance	,											
er.	2 Che	ck this h	ox ► If the	organizatio	n discontini	ed its one	rations or o	disposed of m	ore than 2	5% of its net	255015	
õ	3 Nur		oting members					aisposed of fi	iore man 2		3	13
∘ಶ			dependent votii					line 1b)			4	13
ies			r of individuals e		-	-					5	1
Activities &	6 Tot	al numbei	r of volunteers (	estimate if	necessary)					-	5	0
Aci	7 a Tot	al unrelate	ed business rev	enue from	Part VIII, co	lumn (C), I	line 12			7	7 a	0.
	<b>b</b> Net	unrelated	d business taxal	ole income	from Form					7	7 b	0.
						==01	EIVED	) (	P	rior Year	Cur	rrent Year
0	1		s and grants (Pa			RELL		791		818,762	2.	887,827.
Ĭ			vice revenue (P					181				
Revenue	10 Inv	estment ır	ncome (Part VII	l, column (	A), lines 33	4, and 7d)	1 3 5012	RS-05(		106,059	9.	117,375.
Œ		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9ch 10c, and 11e)										
					9	11 11 11 11 11	<u> </u>			645,710	).	733,101.
			to or for memb		سيا							
ø			er compensation				umn (A), li	ines 5-10)		35,924	ł.	37,546.
penses	<b>16a</b> Pro	fessional	fundraising fees	s (Part IX,	column (A),	line 11e)						
ę.	<b>b</b> Tot	al fundrai:	sıng expenses (	Part IX, co	lumn (D), Iır	ne 25) 🟲						
ũ	17 Oth	er expens	ses (Part IX, col	umn (A), l	nes 11a-11d	i, 11f-24e)		·		59,394	1.	59,001.
	<b>18</b> Tot	al expens	es Add lines 13	3-17 (must	equal Part I	X, column	(A), line 25	5)		741,028		829,648.
		-	s expenses Sut	-	•		` ''	•		183,793		175,554.
8 8									Regionin	g of Current Ye		d of Year
Net Assets Fund Baland	<b>20</b> Tot	al assets	(Part X, line 16)	)						, 937, 742		,910,600.
4 P	<b>21</b> Tot		es (Part X, line							,376,351		,850,001.
ξĘ	<b>22</b> Net	assets o	r fund balances	Subtract I	ine 21 from	line 20				,561,391	1	,060,599.
Da					1110 21 110111					, 501, 591	L. 1	,000,399.
Part II Signature Block												
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on a unfav information of which preparer has any knowledge												
11/4/2013												
Sig	מר	Signatu	ure of officer		_				Da	te ' / / /	1001)	<del> </del>
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110		Type or	r print name and title	<u> </u>	Short	1 208	Wier					
			preparer's name		Preparer's sig	natere _		Date ,	, "1	Check If	: PTIN	
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US	e Only	Firm's addr			RIVER I	NKTAE #	υ				68-0290	
	==	Ļ		ION, CA		-2.4	,			Phone no (2	209) 474	
	,		nis return with the								X Y	
BA	A For Par	perwork F	Reduction Act N	otice, see	the separate	: instructio	ns.	TE	EA0113L 12/	18/12	Fo	orm <b>990</b> (2012)

TEEA0113L 12/18/12

Form 990 (2012) JEWISH COMMUNITY	Y FOUNDATION OF THE WEST	68-0	44583	35		age 2
Partill Statement of Program Se	· · · · · · · · · · · · · · · · · · ·					
	response to any question in this Part III					
1 Briefly describe the organization's miss TO RECEIVE, ACQUIRE, HOL CHARITABLE PURPOSES.	D, MANAGE, ADMINISTER AND EXPEND			<u> FO</u> I	<u>R</u>	
			. <b>-</b>	 	 	
O Daliba anno and dala anno and	di una	alad an the same				
Form 990 or 990-EZ?	cant program services during the year which were not li	sted on the prior		Vaa	₽.	Na
If 'Yes,' describe these new services of	o Schadula O		L	Yes	X	No
	or make significant changes in how it conducts, ar	v nrogram services?	П	Yes	X	No
If 'Yes,' describe these changes on Sci		y program services		103	M	110
Describe the organization's program se Section 501(c)(3) and 501(c)(4) organizat others, the total expenses, and revenu	ervice accomplishments for each of its three largest ions and section 4947(a)(1) trusts are required to report e, if any, for each program service reported.	program services, as the amount of grants a	measur nd alloca	ed by o	expen o	ises.
4a (Code ) (Expenses \$	733,101. including grants of \$	) (Revenue	\$			)
DISTRIBUTED FUNDS FOR CH	ARITABLE PURPOSES.					
4b (Code ) (Expenses \$ MANAGED FUNDS HELD FOR C	26,642. including grants of \$	) (Revenue				
			- <b>-</b> -		<b>_</b>	
						<b>-</b>
		- <del></del>				
			<del>-</del>			
4 c (Code ) (Expenses \$	including grants of \$	) (Revenue	\$			)
			. <b>-</b>			
			<b></b> _			
4d Other program services (Describe in S	Schedule () )	<u>,</u>				
(Expenses \$		(Revenue \$			)	
4e Total program service expenses ►	759,743.	,			<u> </u>	
ВАА	TEEA0102L 08/08/12			Forn	1 <b>990</b>	(2012)

			res	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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		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	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part $V$	10	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			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
l	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
(	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
(	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	<u> </u>	X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		1

Form 990 (2012) JEWISH COMMUNITY FOUNDATION OF THE WEST

Part IV\* Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25	24a		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	スの		2.75 2.75
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<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	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note. All Form 990 filers are required to complete Schedule O	38	X	
BAA		Form	990 (	2012)

Part V | Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a	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	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	-		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b	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 Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were	Ch		
7	not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	6 b		<del></del>
		}		
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?	7 a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7 c		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 benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter	M		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b	1		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them ).			
	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	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		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans   13b			
c	Enter the amount of reserves on hand	1		
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14b		
			_	

Form 990 (2012) JEWISH COMMUNITY FOUNDATION OF THE WEST 68-0445835 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members 1 a 13 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 13 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 X 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members. Х stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this is done 12 c X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15 a **b** Other officers of key employees of the organization Х 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16<sub>b</sub> Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

BAA

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

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

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

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

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

 $|\mathbf{X}|$  Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

<u> </u>	<del></del>	·								
				(C	;)					
(A) Name and Title	(B) Average hours per week (list	one bo	ox. un	less p	erso	more to the more to the more to the more the mor	h an e)	(D)  Reportable compensation from the organization	(E)  Reportable  compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Key employee Officer Institutional trustee Individual trustee or director or director or director		Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations		
(1) ALICE CARTWRIGHT	2									
TREASURER	0	X		X				0.	0.	0.
(2) MICHAEL ROCHMAN	2									
VICE PRESIDENT	0	X		Х				0.	0.	0.
(3) JOEL HASS	2									
DIRECTOR	0	X						0.	0.	0.
(4) VERONICA KAUFMAN	2									
DIRECTOR	0	X						0.	0.	0.
(5) MARGARET KENT NEWTON	2									
SECRETARY	0	X		X				0.	0.	0.
(6) ANDY BARON	2									
DIRECTOR	0	X					ļ	0.	0.	0.
(7) TIM TAYLOR	2					!				
PRESIDENT	0	X		Х				0.	0.	0.
(8) LARRY SALTZMAN	2									
DIRECTOR	0	X						0.	0.	0.
(9) ARIEL SHENHAR	2	1		.						
DIRECTOR	0	Х					:	0.	0.	0.
(10) MARK COHN	2									
DIRECTOR	0	Х						0.	0.	0.
(11) TERRY KAUFMAN	2									
SECRETARY	0	X						0.	0.	0.
(12) MIKE DEAN	2									
DIRECTOR	0	Х						0.	0.	0.
(13) ANNE EISENBERG	2	1								
DIRECTOR	0	X						0.	0.	0.
(14)	1	1								
	<u> </u>									

Part VII   Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												nt)	
	(B)	Ī			<del>)</del>					T			
(A) Name and title	Average hours per week	box	, unle cer a	theck ess pe nd a o	erson direct	than is both or/trus	h an tee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	amo	(F) stimated unt of ot appensation	her	
	(list any hours for related organiza tions below dotted line)	or director	nstitutional trustee	Officer	Key employec	Highest compensated employee	ormer	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	f org an	janizatio janizatio id relate anizatio	on d	
(15)		-											
(16)										-			
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)										-			
(25)													
1 b Sub-total	_						^	0.	0.			0.	
c Total from continuation sheets to Part VII, Sectio d Total (add lines 1b and 1c)							•	0. 0.	0.			0.	
2 Total number of individuals (including but not limited t from the organization ▶ 0	o those I	ısted	abo	ve) v	who	recer	ved	more than \$100,00	0 of reportable comp	ensatio	,·-		
Did the organization list any <b>former</b> officer, direct on line 1a? If 'Yes,' complete Schedule J for such	or or trus	stee,	key	em	ploy	ee, c	or hi	ghest compensat	ed employee	3	Yes	No X	
For any individual listed on line 1a, is the sum of the organization and related organizations greater	reportab	le co	mpe 00?	ensa If '\	ition 'es'	and	oth olet	er compensation e Schedule J for	from			Λ	
such individual 5 Did any person listed on line 1a receive or accrue	comper	nsatio	n fr	om	anv	unre	late	d organization or	ındıvıdual	4		X	
for services rendered to the organization? If 'Yes, Section B. Independent Contractors	' comple	ete S	chec	lule	J fo	r suc	h p	erson_		5		X	
Complete this table for your five highest compens compensation from the organization Report compens	ated ind ation for	epen the c	den alen	t co dar	ntra year	ctors endi	tha	t received more t	han \$100,000 of ganization's tax year				
(A) Name and business addre	(A) (B) (C) Name and business address Description of services Compensation												
				-									
				_									
2 Total number of independent contractors (including but		ited t	o the	se I	ıste	d abo	ve)	who received more	than	<u> </u>			
\$100,000 in compensation from the organization	0												

		Check if Schedule O contain	ins a resp	onse to any questi	on in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
是四	1 a	Federated campaigns	1 a		<del></del>			
줊影		Membership dues	1 b					
S E	С	Fundraising events.	1 c					
뜯욁		Related organizations	1 d					
ջ툂		Government grants (contributions)	1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		All other contributions, gifts, grants, a similar amounts not included above		887,827.				
동물	g	Noncash contributions included in Ins	:1a-1f' <b>\$</b> _					
	h	Total. Add lines 1a-1f		<u> </u>	887,827.			
굶			Ļ	Business Code				
園	2 a							
핑	b							
[≌	C							
E SE	d	·						
PROGRAM SERVICE REVENUE	е							
စ္အျ	f	All other program service rev	enue [					
_	g	Total. Add lines 2a-2f		•				
İ	3	Investment income (including	dividends	s, interest and	445 055			115 255
1		other similar amounts)		hand areasada	117,375.		<del></del>	117,375.
	4	Income from investment of ta	ıx-exempi	bond proceeds				·
	5	Royalties	(ı) Real	(ii) Personal				<del></del>
	٤.	Gross rents.	(i) Neai	(ii) i ersonal				
		Less rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)		<u> </u>				
		[ (a)	Securities	(II) Other			1	
	7 a	Gross amount from sales of assets other than inventory		1				
	_			+				
	b	Less: cost or other basis and sales expenses					:	
	c	Gain or (loss)						
		Net gain or (loss)		<u> </u>				~ <del></del>
		Gross income from fundraisir	na events					
꽃	0 0	(not including \$	•					
띪		of contributions reported on I	ine 1c)					
OTHER REVENU		See Part IV, line 18	;	a				
뿔		Less direct expenses	1	b				
0	C	Net income or (loss) from fur	ndraising e	events				
		Gross income from gaming a See Part IV, line 19	ctivities.	a				
		Less direct expenses	1	b				
	C	Net income or (loss) from ga	ming activ	rities				
		Gross sales of inventory, less and allowances	returns	a				
		Less cost of goods sold		b				
	C	: Net income or (loss) from sa	les of inve				<u> </u>	-
		Miscellaneous Revenue		Business Code				
	11 a		· – – – <del>-</del>					
	b		}		<del></del>			<del></del>
	C	; 						<del></del>
	_	All other revenue				~~.		<del> </del>
		Total. Add lines 11a-11d			1 005 000		<del> </del>	445.055
	12	Total revenue. See instructio	ΠS	<u></u>	1,005,202.	0.	0	. 117, 375.

Part IX Statement of Functional Expenses

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

Seci	Check if Schedule O contains a re			implete column (A)	TT
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	733,101.	733,101.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	34,475.		34,475.	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	3,071.		3,071.	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	: Accounting	15,600.		15,600.	
c	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	26,642.	26,642.		
_	Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0)  Advertising and promotion				
13	Office expenses	2,204.		2,204.	
14	Information technology .	2,204.		2,204.	
15	Royalties			-	<u> </u>
16	Occupancy	3,600.		3,600.	
17	Travel	3,000.		3,000.	
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	269.		269.	
	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)	3,060.		3,060.	·
,	ANNUAL REPORT	2,843.		2,843.	
	OTHER EXPENSES	2,665.		2,665.	-
,	LEGAL SERVICES	2,118.	,,	2,118.	<del>-</del>
		۷,110.		2,110.	<del>-</del>
	All other expenses			_	<del></del>
	Total functional expenses. Add lines 1 through 24e	929 649	750 712	60 005	
	· · · · · · · · · · · · · · · · · · ·	829,648.	759,743.	69,905.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here  if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response to any qu	uestic	n in this Part X			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing			19,767.	1	11,830.
	2	Savings and temporary cash investments		Ī		2	<del></del>
	3	Pledges and grants receivable, net		j		3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	office emplo	ers, directors, yees Complete		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions) Complete	ersor (3)(B) )(9) v e Par	ns (as defined under , and contributing oluntary employees' t II of Schedule L		6	
A	7	Notes and loans receivable, net				7	
A S E T S	8	Inventories for sale or use				8	<del></del>
Ī	9	Prepaid expenses and deferred charges			2,573.	9	2,027.
	10 a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10:	15,120.	2,0,0.		2,02
		Less accumulated depreciation	101		940.	10 c	670.
	11	Investments — publicly traded securities.		11/1001	6,914,462.	11	6,896,073.
	12	Investments – other securities. See Part IV, line 11		Ī	<u> </u>	12	0,000,000
	13	Investments – program-related. See Part IV, line 11		Ī		13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11		İ		15	
	16	Total assets. Add lines 1 through 15 (must equal line	İ	6,937,742.	16	6,910,600.	
	17	Accounts payable and accrued expenses			3,459.	17	3,805.
	18	Grants payable				18	•
	19	Deferred revenue		Į		19	
ŀ	20	Tax-exempt bond liabilities		ļ		20	
Ä	21	Escrow or custodial account liability Complete Part		}-		21	
<b>LIAB-L-T-ES</b>	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, c d disc	lirectors, trustees, qualified persons		22	
į	23	Secured mortgages and notes payable to unrelated the	hird p	arties		23	
5	24	Unsecured notes and loans payable to unrelated third	d part	ies	-,,· <u>,,</u>	24	<del></del>
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to oplete	related third parties, Part X of Schedule D	3,372,892.	25	2,846,196.
	26	Total liabilities. Add lines 17 through 25			3,376,351.	26	2,850,001.
N E N		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere 🟲	X and complete			
Ą	27	Unrestricted net assets		ļ	95,319.	27	85,706.
くいろにしく	28	Temporarily restricted net assets			1,806,946.	28	2,123,191.
	29	Permanently restricted net assets			1,659,126.	29	1,851,702.
OR F:		Organizations that do not follow SFAS 117 (ASC 958), cl and complete lines 30 through 34.	heck I	nere ►			
OZCT	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building, or equipn	fund		31	· · · · · ·	
Ļ	32	Retained earnings, endowment, accumulated income	, or o	ther funds		32	· · · · · · · · · · · · · · · · · · ·
日本 して とし いっぱん しゅうしゅう	33	Total net assets or fund balances			3,561,391.	33	4,060,599.
Š	34	Total liabilities and net assets/fund balances		Ì	6,937,742.	34	6,910,600.
BA	A			· ,	<u> </u>		Form <b>990</b> (2012)

Forn	990 (2012) JEWISH COMMUNITY FOUNDATION OF THE WEST 68-044583	5_	Pa	age <b>12</b>
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1,0	05,2	202.
2	Total expenses (must equal Part IX, column (A), line 25)	8	29,	648.
3	Revenue less expenses Subtract line 2 from line 1	1	75,	554.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	3,5	61,	391.
5	Net unrealized gains (losses) on investments	3	23,	654.
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments			
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))	4,0	60,	 599.
Pai	t XII   Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
	, , , , , , , , , , , , , , , , , , ,		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
t	Were the organization's financial statements audited by an independent accountant?	2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			}
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3 8	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3 a		Х
ŀ	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		
BAA		Form	990	(2012)

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2012

Name o	f the	organization	- <del></del>						Employe	r identifical	tion number		
JEW:	WISH COMMUNITY FOUNDATION OF THE WEST 68-0445835												
Part													
The o	rga	nization is not a priva	te foundation becaus	e it is (For lines 1 thro	ugh 11,	check o	nly one	box )					
1	П	A church, convention	of churches or assoc	ciation of churches desc	cribed in	section	n 170(b)	(1)(A)(i)					
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)								
3	Н	A hospital or a coope	erative hospital servic	e organization describe	ed in <b>sec</b>	tion 17	0(b)(1)( <i>A</i>	A)(iii).					
4	Н	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's											
	ш	name, city, and state											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section</b> 170(b)(1)(A)(iv). (Complete Part II)											
6				overnmental unit descri	bed in <b>s</b>	ection 1	170(b)(1)	(A)(v).					
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8	Ш	A community trust de	escribed in <b>section 17</b>	<b>'0(b)(1)(A)(vi).</b> (Comple	te Part I	l.)							
9	X	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)											
10		An organization orga	nized and operated e	xclusively to test for pu	ıblıc safe	ety. See	section	1 509(a)	(4).				
11		supported organization	zed and operated exclus as described in section ion and complete line	sively for the benefit of, to 509(a)(1) or section 509( s 11e through 11h	perform (a)(2). Se	the function see section	tions of, on 509(a)	or carry <b>(3).</b> Che	out the p ck the bo	urposes o x that de	of one or mo escribes the	re pub type o	olicly of
		a ∏Type I b		Type III - Function	nally inte	earated	,	а □ .	Type III	- Non-fi	unctionally	ıntear	rated
е		By checking this box other than foundation is section 509(a)(2)	, I certify that the org managers and other tha	anization is not controll an one or more publicly s	led directions	tly or in	ations d	escribed	ın sectio	on 50 <sup>9</sup> (a)	(1) or	าร	
f		If the organization rece check this box	eived a written determii	nation from the IRS that i	s a Type	I, Type	II or Typ	e III sup	porting c	organızatı	on,		
g		Since August 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	37		
		# A I			1 11	. 41			-L - ()			Yes	No
		(i) A person who o	airectly or indirectly co erning body of the sui	ontrols, either alone or opported organization?	togetne	r with pe	ersons d	iescribe	a in (ii)	and (III)	11 g (i)		
			er of a person descri								11 g (ii)		
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?						11 g (iii)		
h		` '		e supported organization							9 (,	L	<u></u>
		(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i	s the ation in i) listed in overning ment?	(v) Did yo the organ column ( supr	ou notify ization in i) of your port?	organiz colur organiz	s the ration in mn (i) ed in the S ?	(vii) Amoun sup	t of more	netary
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)					<del> </del>								<del></del>
<u>(D)</u>													
<u>(E)</u>													
Total													

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

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

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

Sec	tion A. Public Support							<del></del>
	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	2	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
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	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support					<del></del>		
	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	2	(f) Total
7	Amounts from line 4	_						
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 activ	ities, etc (see ins	structions)				12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
	tion C. Computation of Pu							
	14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)).						14	%
	Public support percentage from		,			L	15	%
16a 33-1/3% support test — 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.								
t	b 33-1/3% support test — 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
17 a	17a 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance test The organiz	es' test, check this ation qualifies as	box and <b>stop he</b> a publicly support	r <b>e.</b> Explain ir ted organizat	n Part ion	IV how the ►
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and s	ee inst	tructions

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)

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in) 🟲	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total	
1	Gifts, grants, contributions and membership fees							
	received (Do not include							
	any 'unusual grants ')	350,032.	1,225,638.	492,414.	818,762.	887,827.	3,774,673.	
2	Gross receipts from admis-							
	sions, merchandise sold or services performed, or facilities							
	furnished in any activity that is							
	related to the organization's							
_	tax-exempt purpose						0.	
3	Gross receipts from activities							
	that are not an unrelated trade or business under section 513						0.	
4	Tax revenues levied for the						<u> </u>	
	organization's benefit and							
	either paid to or expended on							
5	its behalf The value of services or						0.	
•	facilities furnished by a							
	governmental unit to the							
	organization without charge		1 005 000				0.	
	<b>Total.</b> Add lines 1 through 5	350,032.	1,225,638.	492,414.	818,762.	887,827.	3,774,673.	
/ a	Amounts included on lines 1, 2, and 3 received from							
	disqualified persons	0.	0.	0.	0.	0.	0.	
b	Amounts included on lines 2							
	and 3 received from other than							
	disqualified persons that exceed the greater of \$5,000 or							
	1% of the amount on line 13			i				
	for the year	0.	0.	0.	0.	0.	0.	
C	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.	
8	Public support (Subtract line						0 774 670	
<u> </u>	7c from line 6)		l				3,774,673.	
	tion B. Total Support	(=) 2000	(h) 2000	(=) 2010	(d) 2011	(a) 2012	(O Total	
	dar year (or fiscal yr beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total	
-	Amounts from line 6	350,032.	1,225,638.	492,414.	818,762.	887,827.	3,774,673.	
iua	Gross income from interest, dividends, payments received							
	on securities loans, rents,							
	royalties and income from							
_	similar sources Unrelated business taxable	120,432.	154,324.	121,445.	106,059.	117,375.	619,635.	
D	income (less section 511							
	taxes) from businesses							
	acquired after June 30, 1975						0.	
_	Add lines 10a and 10b	120,432.	154,324.	121,445.	106,059.	117,375.	619,635.	
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is							
	regularly carried on						0.	
12	Other income Do not include							
	gain or loss from the sale of capital assets (Explain in		1					
	Part IV)						0.	
	Total support. (Add Ins 9, 10c, 11, and 12)		1,379,962.	613,859.		1,005,202.	4,394,308.	
14	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secon	d, third, fourth, or	fifth tax year as	a section 501(c)(	3) ▶ □	
	Section C. Computation of Public Support Percentage							
15	Public support percentage for 20	012 (line 8, colum	n (f) divided by lin	e 13, column (f)).		15	85.90 %	
16	Public support percentage from	2011 Schedule A,	Part III, line 15			16	82.45 %	
Sec	tion D. Computation of Inv	estment Inco	ne Percentage					
17	Investment income percentage f	or <b>2012</b> (line 10c,	column (f) divided	d by line 13, colur	nn (f))	17	14.10 %	
18	Investment income percentage f	rom <b>2011</b> Schedu	lle A, Part III, line	17		18	17.55 %	
	33-1/3% support tests - 2012. I	f the organization	did not check the	box on line 14, ai	nd line 15 is more	e than 33-1/3%, a	ind line 17	
	is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organi	zation qualifies a	s a publicly supp	orted organizatioi	n ► X	
b	33-1/3% support tests – 2011. If line 18 is not more than 33-1/3%	the organization	did not check a bo and <b>stop here</b> . The	ox on line 14 or lir e organization qua	ne 19a, and line difies as a public	16 is more than 3 by supported organic	3-1/3%, and ► □	
20	Private foundation. If the organi		•		•		▶ H	
							<u>_</u>	

Schedule A	(Form 990 or 990	-EZ) 2012	JEWISH	COMMUNITY	FOUNDAT:	ION OF	THE WEST	68-0445835	Page 4
Part IV	Supplement Part II, line 1 (See instruct	al Informati 17a or 17b; tions).	on. Com and Part	plete this pai III, line 12. A	t to provid Iso comple	e the exete this	planations in part for any	equired by Part II, I additional information	ine 10; on.
	<b>~</b>		·						
	·								
									<b></b>
			· <b>-</b>		<del></del>				
		<del></del>							
- <del></del>									

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

## **Supplemental Financial Statements**

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

OMB No 1545-0047 Open to Public Inspection &

	VISH COMMUNITY FOUNDATION OF T		<del></del>	68-0445835	<del></del>
Par	t'l  Organizations Maintaining Dono the organization answered 'Yes'	ir Advised Funds or Other Similar Fu to Form 990, Part IV, line 6.	nds or Acc	ounts. Complete	IT
		(a) Donor advised funds	(b) F	unds and other accou	nts
1	Total number at end of year	83			
2	Aggregate contributions to (during year)	806,762.			
3	Aggregate grants from (during year)	649,098.			
4	Aggregate value at end of year	2,123,191.			
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the assets held in d organization's exclusive legal control?	lonor advised	funds X Yes	☐ No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant fur of the donor or donor advisor, or for any othe	nds can be use r purpose cor	ed only iferring XYes	☐ No
Päř	ี่∜II∰ Conservation Easements. Comp	lete if the organization answered 'Yes	s' to Form 9	990, Part IV, line 7	7.
1	Purpose(s) of conservation easements held by				
	Preservation of land for public use (e g , r	· 🗀		ally important land are	ea
	Protection of natural habitat	Preservation	of a certified	historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization hast day of the tax year	neld a qualified conservation contribution in the for	F		
	T			leld at the End of the	Tax Year
	a Total number of conservation easements.		2 a		
	Total acreage restricted by conservation ease		2 b		
	Number of conservation easements on a certi	• •	2 c		
	Number of conservation easements included i structure listed in the National Register		2 d		
3	Number of conservation easements modified, trar tax year ▶	isterred, released, extinguished, or terminated by	the organizatio	n during the	
4	Number of states where property subject to conse	rvation easement is located •	_		
5	Does the organization have a written policy re and enforcement of the conservation easement	nts it holds?		Yes	☐ No
6	Staff and volunteer hours devoted to monitoring,			ır	
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easements duri	ng the year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of so	ection 170(h)(	4)(B)(ı) <b>Ye</b> s	☐ No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements	conservation easements in its revenue and expe to the organization's financial statements that	nse statement, describes the	and balance sheet, and organization's accour	d nting for
Pái	Complete if the organization ans	ctions of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Sin 8.	nilar Assets.	
1 a	a If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	ld for public exhibition, education, or research in			works of
ı	If the organization elected, as permitted unde historical treasures, or other similar assets held for following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in furth	e statement ar erance of publ	nd balance sheet work ic service, provide the	s of art,
	(i) Revenues included in Form 990, Part VIII,	line 1		<b>►</b> \$	
	(ii) Assets included in Form 990, Part X			<b>►</b> \$	
2	If the organization received or held works of art, it amounts required to be reported under SFAS	nistorical treasures, or other similar assets for fina 116 (ASC 958) relating to these items:	ncıal gaın, pro	vide the following	
i	a Revenues included in Form 990, Part VIII, line			<b>►</b> \$	
ı	Assets included in Form 990, Part X			<b>►</b> \$	

Schedule D (Form 990) 2012 JEWIS	H COMMUN	ITY I	OUNDATION	OF	THE WEST		68-044	5835		Page 2
Part III Organizations Maintai	ning Colle	ctions	of Art, Histo	orica	l Treasures, o	r Other S	imilar Ass	ets (c	ontinu	ed)
3 Using the organization's acquisition items (check all that apply)	, accession, a	nd other	records, check a	any of	the following that a	re a signific	ant use of its	collectio	n	
a Public exhibition			<b>d</b> Loan	or exc	change programs					
<b>b</b> Scholarly research			e Other							
c Preservation for future generation	ations									
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII										
5 During the year, did the organizato be sold to raise funds rather the	tion solicit or nan to be mai	receive intained	donations of a	rt, hist organi	orical treasures, or zation's collection	or other sin	nılar assets	Yes		No
Part IV: Escrow and Custodial Arra	ngements. ( n Form 990	Comple ), Part	te if the organiz X, line 21.	zation	answered 'Yes' t	o Form 990 	), Part IV, line	e 9, or		
1 a Is the organization an agent, trus on Form 990, Part X?						her assets	not included	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII a	ınd com	plete the follow	ing tal	ble.					
								Amoun	t	
c Beginning balance						1 c				
d Additions during the year						1 d				
e Distributions during the year						1 e				
f Ending balance				_		1 f	·			<del></del>
2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No										
<b>b</b> If 'Yes,' explain the arrangement in Part XIII Check here if the explantion has been provided in Part XIII										
Part V Endowment Funds. C			ganızatıon ar	nswe						
	(a) Curren	ıt	<b>(b)</b> Prior ye	ar	(c) Two years	(d) Ti	ree years	(e) f	our yea	rs
1 a Beginning of year balance.	1,659	,126.	1,671,2		1,444,64		114,723.			<u>530.</u>
<b>b</b> Contributions	77,	, 484.	133,7	731.	153,49	7.	172,625.		-420,	837.
c Net investment earnings, gains, and losses	198	,914.	-106,2	230.	147,78	0.	222,175.		10,	850.
d Grants or scholarships	83,	,822.	39,6	552.	74,64	7.	64,876.			
Other expenditures for facilities and programs							0.		15,	438.
f Administrative expenses								1	,114,	723.
<b>g</b> End of year balance	1,851		1,659,1		1,671,27		444,647.	1	,114,	723.
<ol><li>Provide the estimated percentage</li></ol>	e of the curre	nt year	end balance (lii	ne 1g,	column (a)) held	as				
a Board designated or quasi-endowment			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							
<b>b</b> Permanent endowment ►	% %									
c Temporarily restricted endowment ▶ %										
The percentages in lines 2a, 2b, and 2c should equal 100%.										
3a Are there endowment funds not in the organization by	he possession	of the o	rganization that	are he	ld and administered	d for the		ſ	Yes	No
(i) unrelated organizations								3a(i)		X
(ii) related organizations								3a(ii)		X
<b>b</b> If 'Yes' to 3a(II), are the related of	rganizations	listed a	s required on S	chedu	le R?			3b		
4 Describe in Part XIII the intended	uses of the	organiz	ation's endowm	ent fu	nds SEE PAR	IIIX TS				
Part VI Land, Buildings, and	Equipment	. See	Form 990, P	art X						
Description of property		(a) Cos	st or other basis	(b	Cost or other basis (other)		umulated eciation	(d)	Book va	lue
1 a Land	· · · · · · · · · · · · · · · · · · ·	`·	· <u>·</u>		•	, , ,	7 1			
<b>b</b> Buildings										
c Leasehold improvements			1,929.				1,929.			0.

**d** Equipment 670. 1,868. 1,198. 11,323. 11,323. 0. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 670.

BAA

Schedule **D** (Form 990) 2012

(2) AGENCY FUNDS 2,846,196.

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

(11)

Total (Column (b) must equal Form 990, Part X, column (B) line 25) ▶ 2,846,196.

	nedule D (Form 990) 2012 JEWISH COMMUNITY FOUNDATION OF THE WEST	C 68-0445835 Page <b>4</b>
	art XI Reconciliation of Revenue per Audited Financial Statements Wit	h Revenue per Return N/A
1	Total revenue, gains, and other support per audited financial statements	1
	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
	a Net unrealized gains on investments	
_	b Donated services and use of facilities 2b	
	c Recoveries of prior year grants	
	d Other (Describe in Part XIII.)	
	e Add lines 2a through 2d	2 e
	S Subtract line 2e from line 1	3
	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	
	a Investment expenses not included on Form 990, Part VIII, line 7b.	
	b Other (Describe in Part XIII )	
	c Add lines 4a and 4b	4c
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
	art XII   Reconciliation of Expenses per Audited Financial Statements W	ith Expenses per Return N/A
	,	<u> </u>
	a Donated services and use of facilities b Prior year adjustments 2 b	
	c Other losses 2c	
	d Other (Describe in Part XIII )	
	e Add lines 2a through 2d	2 e
	Subtract line 2e from line 1	3
	a Investment expenses not included on Form 990, Part VIII, line 7b.	
b	<b>b</b> Other (Describe in Part XIII )	
С	c Add lines 4a and 4b	4 c
_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Part	rt XIII Supplemental Information	
line 4	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, li e 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete t	nes 1a and 4; Part IV, lines 1b and 2b, Part V, nis part to provide any additional information
	PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND	
	ENDOWMENTS ARE PERMANENT FUNDS THAT ALLOW DONORS TO SUF	PORT THEIR FAVORITE CHARITIES
	OR_CAUSES_IN_PERPETUITY.	
	PART X - FIN 48 FOOTNOTE	
	THE FOUNDATION IS EXEMPT FROM FEDERAL AND STATE INCOME	TAXES UNDER SECTION 501(C)(3)
	OF THE INTERNAL REVENUE CODE AND SECTION 23701D OF THE	CALIFORNIA REVENUE AND
	TAXATION CODE. IN ADDITION, THE FOUNDATION HAS BEEN DE	TERMINED NOT TO BE A PRIVATE
	FOUNDATION UNDER SECTION 170(B)(1)(A)(VI) OF THE INTERN	AL REVENUE CODE
BAA		Schedule <b>D</b> (Form 990) 2012

Schedule D (Form 990) 2012 JEWISH COMMUNITY FOUNDATION OF THE WEST  Part XIII Supplemental Information (continued)	68-0445835	Page 5
PART X - FIN 48 FOOTNOTE (CONTINUED)		
THE ORGANIZATION'S TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS	TAXING AUTHORITIES	
THE ORGANIZATION'S FEDERAL TAX RETURNS FOR 2010, 2011 AND 2012		
EXAMINATION BY THE INTERNAL REVENUE SERVICE; STATE INCOME RETUR	NS FOR 2009, 2010,	
2011 AND 2012 ARE OPEN TO EXAMINATION. IN EVALUATING THE ORGAN	IZATION'S TAX	
PROVISIONS AND ACCRUALS, MANAGEMENT BELIEVES THAT ITS ESTIMATES	ARE APPROPRIATE	
BASED ON CURRENT FACTS AND CIRCUMSTANCES.		
	<b></b>	

# SCHEDULE I

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 2012

Open to Public Inspection

Employer identification number

68-0445835

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

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? Part I General Information on Grants and Assistance JEWISH COMMUNITY FOUNDATION OF THE WEST Name of the organization

SEE PART IV

**≗** □

X Yes

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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) AMERICAN FRIENDS OF MEIR PANI  5316 NEW UTRECHT AVE  BROOKLYN, NY 11219			25,000.	0	CASH		CHARITABLE PURPOSES
(2) AMERICAN RED CROSS-DES MOINES  PO BOX 4002033  DES MOINES, IA 50340			7,000.	.0	CASH		CHARITABLE PURPOSES
(3) CONGREGATION BETH SHALOM 4746 EL CAMINO AVE SACRAMENTO, CA 95608			9,469.	0.	CASH		CHARITABLE PURPOSES
(4) CONGREGATION B'NAI ISRAEL 3600 RIVERSIDE BLVD SACRAMENTO, CA 95818			28,368.	0.	CASH		CHARITABLE PURPOSES
(5) CROCKER ART MUSEUM			11,100.	0.	CASH		CHARITABLE PURPOSES
(6) <u>HADAS</u>			165,046.	0.0	CASH		CHARITABLE PURPOSES
(7) HILLEL CAPITAL CAMPAIGN 328_A_STREET DAVIS, CA 95616			20,000.	0.	CASH		CHARITABLE CONTRIBUTIONS
(8) JEWISH FEDERATION OF SACRAMEN  2351 WYDA WAY  SACRAMENTO, CA 95825			64,414.	0.	CASH		CHARITABLE PURPOSES
2 Enter total number of section 501(c)(3) and government organizations is Enter total number of other organizations listed in the line 1 table	3) and government o	lons l	isted in the line 1 table			<b>A A</b>	8 4
בוונכן נסנמן וומנווסכן כן כעוכן הואסרוקלים		100					•

Schedule I (Form 990) (2012)

TEEA3901L 11/30/12

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

Page 2

Schedule I (Form 990) (2012) (f) Description of non-cash assistance हिन्दिश्किः Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other (e) Method of valuation (book, FMV, appraisal, other) ORGANIZATIONS THAT ARE TAX EXEMPT PUBLIC CHARITIES, OR TO STATE OR LOCAL GOVERNMENTAL ORGANIZATIONS QUALIFIED TO RECEIVE TAX-DEDUCTIBLE CHARITABLE CONTRIBUTIONS, SUCH AS PROCEDURES ARE IMPLEMENTED TO ENSURE SECURITY OF GRANT FUNDS AS WELL AS COMPLIANCE DONORS RECEIVE WRITTEN CONFIRMATION OF ALL GRANTS/DISBURSEMENTS DISTRIBUTED IN THE JEWISH COMMUNITY FOUNDATION OF THE WEST DISBURSES GRANTS ONLY TO U.S. (d) Amount of non-cash assistance PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. (c) Amount of cash grant (b) Number of recipients RESPONSE TO THEIR RECOMMENDATIONS. STATE COLLEGES OR UNIVERSITIES additional information (a) Type of grant or assistance WITH LAW. m 4 ß 9

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

₽

Continuation Page 1

2012

Schedule I Cont (Form 990) 2012 (h) Purpose of grant or assistance CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE PURPOSES PURPOSES PURPOSES PURPOSES PURPOSES Employer identification number |最前間||Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 68-0445835 (f) Method of valuation (book, EMV, appraisal, other) CASH CASH CASH CASH CASH (e) Amount of non-cash assistance (d) Amount of cash grant 15,000 49,763 12,050 26,700 11,021 TEEA4001L 12/10/12 (c) IRC section if applicable JEWISH COMMUNITY FOUNDATION OF THE WEST (b) EIN (a) Name and address of organization or government MABEE/GUMPERT PHILANTHROPIC F. TRUST FUND FOR JEWISH SENIORS 807\_SIERRA OAKS VISTA LANE MOSAIC LAW CONGREGATION 2751 AZALEA ROAD \_ \_ \_ SACRAMENTO, CA 95864 ORANGEVALE, CA 95662 SACRAMENTO, CA 95864 SACRAMENTO, CA 95825 SACRAMENTO, CA 95825 2320 SIERRA BLVD. 7755 HAZEL AVE. \_\_\_ TEMPLE OR RICHON 2300 SIERRA BLVD SHALOM\_SCHOOL\_ Name of the organization 1 1 1 1 1 11111 1 1

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

## 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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection 

JEWISH COMMUNITY FOUNDATION OF THE WEST	68-0445835
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
FORM 990 WAS REVIEWED BY BOARD PRESIDENT PRIOR TO FILING.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
GOVERNING DOCS AND FORM 990 WILL BE MADE AVAILABLE PURSUANT TO	STATE AND FEDERAL
LAWS UPON REQUEST.	
	· <b></b>