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Department of the Treasury

### **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)

2012

OMB No 1545-0047

Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012 D Employer identification number B Check if applicable JEWISH FEDERATION COUNCIL OF GREATER LA Address change 95-1643388 Doina Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 6505 WILSHIRE BLVD Terminated (323)761-8000 City or town, state or country, and ZIP + 4 LOS ANGELES, CA 90048 Amended return Application pending **G** Gross receipts \$ 81,079,398 Name and address of principal officer **H(a)** Is this a group return for JAY SANDERSON Yes 
 No affiliates? 6505 WILSHIRE BLVD LOS ANGELES, CA 90048 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **▼** 501(c)(3) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status 501(c) ( ) ◀ (insert no ) H(c) Group exemption number ▶ Website: ► WWW JEWISHLA ORG K Form of organization 
✓ Corporation 
☐ Trust 
☐ Association 
☐ Other ► L Year of formation 1937 M State of legal domicile CA Part I Summary Briefly describe the organization's mission or most significant activities BASED ON JEWISH VALUES, THE JEWISH FEDERATION OF GREATER LOS ANGELES CARES FOR JEWS IN NEED EVERYWHERE, ENSURES THE JEWISH FUTURE, SUPPORTS A SECURE STATE OF ISRAEL, AND ENGAGES THE GREATER COMMUNITY Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 50 Number of independent voting members of the governing body (Part VI, line 1b) 49 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 186 3,166 6 Total number of volunteers (estimate if necessary) . 7a 6.954 7a Total unrelated business revenue from Part VIII, column (C), line 12 . **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 5,259 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 45,503,542 44,804,424 Program service revenue (Part VIII, line 2g) . 2,842,816 9 3,638,177 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1,607,023 10,500,762 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -396,863 613,490 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 58,761,492 50,351,879 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 26,722,946 22,827,171 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 14,631,178 15,566,181 Expenses 5 - 10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 53,714 65,817 Total fundraising expenses (Part IX, column (D), line 25) ▶8,768,168 b 11,185,965 11,402,172 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 49,645,134 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 52,810,010 19 Revenue less expenses Subtract line 18 from line 12 . -2,458,131 9,116,358 (Assets or defined despes) **Beginning of Current End of Year** Year 20 143,379,540 Total assets (Part X, line 16) . 126,881,663 21 Total liabilities (Part X, line 26) . . . . 25,788,186 26,411,679 22 Net assets or fund balances Subtract line 21 from line 20 101,093,477 116,967,861 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 all information of which preparer has any knowledge 2014-11-06 Signature of officer Sign Here IVAN WOLKIND CHIEF OPERATING & FINANCIAL OFFICER Type or print name and title Print/Type preparer's name Preparer's signature Date Check | PTIN self-employed Paid Firm's name FRNST & YOUNG US LLP Firm's EIN 🕨 Preparer

**Use Only** 

Firm's address ► 18111 VON KARMAN AVENUE SUITE 1000

May the IRS discuss this return with the preparer shown above? (see instructions) .

Phone no (949) 794-2300

Form	990 (2012)					Page <b>2</b>
Par		t of Program Serv edule O contains a res				٦
1	Briefly describe the	e organization's missio	n			
SEE	SCEDULE O					
2		n undertake any signific or 990-EZ?			r which were not listed on	┌ Yes ┌ No
	If "Yes," describe th	nese new services on S	chedule O			
3		n cease conducting, or			onducts, any program	┌ Yes ┌ No
	If "Yes," describe th	nese changes on Sched	lule O			
4	expenses Section 5		4) organization:	s are required to repor	rree largest program services, as t the amount of grants and alloca	
4a	(Code	) (Expenses \$	22,284,392	ıncludıng grants of \$	13,560,396 ) (Revenue \$	2,842,816 )
	SEE SCHEDULE O					
	(Code	) (Expenses \$	11,980,929	ıncludıng grants of \$	8,678,851 ) (Revenue \$	0)
	SEE SCHEDULE O					, 
	(Code	) (Expenses \$	2,299,958	ıncludıng grants of \$	371,024 ) (Revenue \$	0)
	SEE SCHEDULE O					_
4d	Other program ser	vices (Describe in Sch	edule O )			
	(Expenses \$	ınc	luding grants o	f \$	) (Revenue \$	)
4e	Total program serv	/ice expenses ►	36,565,279			
						Form <b>990</b> (2012)

Part IV	Checklist of	Required	<b>Schedules</b>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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 $I^{\bullet}$	3		No
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	Yes	
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		No
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 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
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	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	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	Yes	
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	Yes	
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		No
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	Yes	
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	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	21	Yes	
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		No
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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	25b		No
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	Yes	
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Fell	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   145		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
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	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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			
E-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Ea		No
		5a		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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 \$100,000, and did the	6a		No
h	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
b	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year   7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	71 7g		110
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h	Yes	
8	Form 1098-C?	711	165	
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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		
.0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> 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 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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►IVAN WOLKIND 6505 WILSHIRE BLVD LOS ANGELES, CA (323) 761-8000

Form	990	(2012)
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### 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, or 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 nor any related organization compensated any current officer, director, or trustee

	1	<del></del>									
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)		organization and related organizations
See Additional Data Table											
	•	•	•							Form <b>990</b> (2012)	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	more t	tion ( han d on is	ne l both	box, an	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estima mount o compens from t	ited fother sation :he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M15C)		rganizati relati organiza	ed
											_		
											+		
											+		
											-		
											+		
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											+		
											╁		
											+		
											+		
1b	Sub-Total		<u> </u>	<u> </u>	<u> </u>	<u> </u>		<b></b>			+		
c	Total from continuation sheet	ts to Part VII, S	ection /	<b>A</b> .			-	►					
d	Total (add lines 1b and 1c) .							•	2,409,745		0		419,848
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) wl	ho received more th	an			
												Yes	No
3	Did the organization list any <b>f</b> on line 1a? <i>If</i> " <i>Yes,"</i> complete 5					key •	emplo	yee,	or highest compen	sated employee	3	Yes	
4	For any individual listed on lin organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	, 55	No
	ection B. Independent Co	ntractors											
1	Complete this table for your fi		ensate	d ınde	eper	nden	t contr	acto	rs that received mo	re than \$100,000	of		

(A) Name and business address	(B) Description of services	(C) Compensation
WORLD EXPRESS TRAVEL , 18425 BURBANK BLVD SUITE 512 TARZANA CA 91356	TRAVEL SERVICES	508,411
NASTEC INTERNATIONAL , 5000 N PARKWAY CALABASAS CALABASAS CA 91302	SECURITY SERVICES	779,439
MITSUBISHI ELECTRIC ELECTRONICS U , 25480 NETWORK PLACE CHICAGO IL 60673	REPAIR & MAINTENANCE	652,670
HOLWICK CONSTRUCTORS INC , 1875 CENTURY PARK EAST MOTOR CT LE LOS ANGELES CA 90067	CONSTRUCTION SVCS	576,111
CENTURY PLAZA HYATT REGENCY , 2025 AVENUE OF THE STARS LOS ANGELES CA 90067	CATERING SERVICES	280,953
Table to the first of the day of the first o		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 18

Part VI	***	Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII									
		Check ii Schedule C	o contains a respon	ise to any question i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514			
(0	1a	Federated campaig	ns 1a								
ons, Giffs, Grants Similar Amounts	ь	Membership dues	1b	108,301							
Gra Not				8,660,843							
), A	С	Fundraising events									
등 본	d	Related organizatio	ns 1d	4,138,923							
E. <u>°</u>	е	Government grants (co	ntributions) <b>1e</b>	221,847							
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, g		31,674,510							
Contribution and Other	g	Noncash contributions in 1a-1f \$	ncluded in lines	2,246,280	İ	j	İ				
rg el	h	Total. Add lines 1a	_1 f		44,804,424						
ਹ ਲ		Total. Add lilles 1a	-11	•	1.755 17 12 1						
e l				Business Code							
ge	2a	PROGRAM SERVICES		900099	55,746	55,746					
<u>æ</u> ∣	b	RENT REIMBURSEMENT		531120	2,787,070	2,787,070					
- J	С										
Program Serwce Revenue	d										
E	е										
<u> </u>	f	All other program s	ervice revenue								
<u>₹</u>	g	Total. Add lines 2a	-2f		2,842,816	+					
	3	Investment income			2,042,010						
		and other similar ar			1,755,379		6,954	1,748,425			
	4	Income from investmen	nt of tax-exempt bond	proceeds 🕨	0						
	5	Royalties		🕨	0						
			(ı) Real	(II) Personal							
	6a	Gross rents									
	b	Less rental expenses									
	C	Rental income or (loss)	0	0							
	d	Net rental income of	or(loss)		0						
		(	ı) Securities	(II) O ther							
	7a	Gross amount from sales of assets other than inventory	18,977,175	11,000,000							
	b	Less cost or other basis and	17,935,669	3,296,123							
		sales expenses									
	С	Gain or (loss)	1,041,506	7,703,877	0 745 000			0.745.000			
	d	Net gain or (loss)	1		8,745,383			8,745,383			
Other Revenue	8a	Gross income from events (not includir \$ 8,660,843 of contributions rep See Part IV, line 18	oorted on line 1c)								
<u> </u>	h	Local direct come	a h	1,660,642							
₹	b C	Less direct expens Net income or (loss		1,086,114	574,528			574,528			
		Gross income from See Part IV, line 19	gaming activities	events p	3,,223						
	l.	Loop dimentaries	a b								
	b c	Less direct expens Net income or (loss		vities	0						
		Gross sales of invereturns and allowan	ntory, less ices .								
	1.		a								
		Less cost of goods Net income or (loss		entory	0						
}	С	Miscellaneous Re		Business Code	<u> </u>	+					
-	11a			900099	25,310			25,310			
		REIMBURSEMENT	<u> </u>	900099	13,652			13,652			
	ь	MISCELLANEOUS		200033	15,032						
	C	Λ II ο+h									
	d e	All other revenue  Total. Add lines 11				+					
				• • • •	38,962						
	12	Total revenue. See	Instructions .	🖊	58,761,492	2,842,816	6,954	11,107,298			

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 22,801,171 22,801,171 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 26,000 26,000 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 1,647,571 669,084 517,112 461,375 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 10,784,229 Other salaries and wages 5,792,552 807,347 4,184,330 Pension plan accruals and contributions (include section 401(k) 1,377,345 689,273 117,224 570,848 and 403(b) employer contributions) . . . . 766,586 390,745 70,885 Other employee benefits . . . . 304,956 10 990,450 527,004 100,467 362,979 11 Fees for services (non-employees) O Management . . . . 41,570 41,570 Legal . . . . . . . . 149,308 149,308 62,692 62,692 Professional fundraising services See Part IV, line 17 65,817 65,817 120,752 Investment management fees . . . . . 120,752 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 553,323 329,679 161,798 Schedule O) . . . . . . . 61.846 Advertising and promotion . . 707,613 24,115 12 364,324 319,174 13 Office expenses . . . 455,683 186,969 73,193 195,521 543,712 63,950 158,285 14 Information technology . . 321,477 15 0 Royalties . 2,483,899 451,309 152,154 16 Occupancy . . . . . . 1,880,436 **17** 497,921 379,743 69,973 48,205 Travel . . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 0 19 Conferences, conventions, and meetings . 211,838 79,679 101,089 31,070 20 Interest . . . . . . . . . . . . 40,948 40,948 Payments to affiliates . . . . . . 0 21 22 Depreciation, depletion, and amortization . 1,423,228 941,807 381,720 99,701 23 598,995 119,799 251,578 227,618 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 SPECIAL EVENT EXPENSE 1,543,528 328,265 105,096 1,110,167 **EQUIPMENT REPAIRS AND MAINT** 375,021 103,781 170,464 100,776 TEMPORARY LABOR 248,291 24,416 117,506 106,369 1,127,643 803,910 d ALL OTHER EXPENSES 279,948 43,785 e All other expenses Total functional expenses. Add lines 1 through 24e 25 49,645,134 36,565,279 4.311.687 8,768,168 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X		• •	· · · · · · · · · · · · · · · · · · ·
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	10,373,416	1	23,338,143
	2	Savings and temporary cash investments	14,939,016	2	6,138,304
	3	Pledges and grants receivable, net	11,427,878	3	10,895,550
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
ts	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	184,783	_	0
Assets	_	Nakaa and laana waxayahla mak	254,888	6 7	9,693,266
<b>4</b>	7	Notes and loans receivable, net	234,888	8	9,093,200
	8	Inventories for sale or use	340,406	9	
	9 10a	Prepaid expenses and deferred charges	340,406	9	206,528
		Complete Part VI of Schedule D 10a 35,725,190			
	b	Less accumulated depreciation			18,135,253
	11	Investments—publicly traded securities	25,998,154	11	27,804,845
	12	Investments—other securities See Part IV, line 11	39,672,461	12	43,479,258
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	2,463,798	15	3,688,393
	16	Total assets. Add lines 1 through 15 (must equal line 34)	126,881,663	16	143,379,540
	17	Accounts payable and accrued expenses	4,219,575	17	4,287,433
	18	Grants payable	14,485,274	18	14,330,251
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
Ø	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
ilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L	3,300,000	22	3,300,000
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	3,783,337	25	4,493,995
	26	Total liabilities. Add lines 17 through 25	25,788,186	26	26,411,679
ě		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	85,949,998	27	96,974,862
- B	28	Temporarily restricted net assets	10,330,137	28	15,179,657
豆	29	Permanently restricted net assets	4,813,342	29	4,813,342
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
₩ 4	33	Total net assets or fund balances	101,093,477	33	116,967,861
Net			· · · · ·		<u> </u>
	34	Total liabilities and net assets/fund balances	126,881,663	34	143,379,540

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				r
1	Total revenue (must equal Part VIII, column (A), line 12)			58,7	61,492
2	Total expenses (must equal Part IX, column (A), line 25)			49,6	545,134
3	Revenue less expenses Subtract line 2 from line 1			9,1	.16,358
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4			101,0	93,477
5	Net unrealized gains (losses) on investments			6,7	758,026
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	,		116,9	67,861
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2	2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed a separate basis, consolidated basis, or both	on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	2	2b	Yes	
	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	3			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	_3	la		No
b	If "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.	ired 3	ь		

Software ID: **Software Version:** 

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Form 990, Part VII - Compensation of Compensated Employees, and Indeper	Officers, Dir ident Contra	ectors	s,Tru	ıste	es,	Кеу	/ En	nployees, Highe	st	
<b>(A)</b> Name and Title	(B) Average hours per week (list		than	o not one son i er an trus	box s bo d a tee)	th		(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
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
JONATHAN ANSCHELL DIRECTOR	1 0 0 0	х						0	0	0
SHARON BARADARAN DIRECTOR	1 0 0 0	х						0	0	0
HOWARD BERNSTEIN DIRECTOR	1 0	х						0	0	0
LES BIDER DIRECTOR/VICE CHAIRMAN	1 0 0 0	х		х				0	0	0
LYNN BIDER DIRECTOR	1 0 0 0	х						0	0	0
DEREK BROWN DIRECTOR	1 0 0 0	х						0	0	0
LYNETTE BROWN DIRECTOR	0 0	х						0	0	0
MARK CARREL DIRECTOR	0 0	х						0	0	0
JERRY COHEN DIRECTOR	1 0 0 0	х						0	0	0
ROCHELLE COHEN DIRECTOR	10	х						0	0	0
LARRY COHEN DIRECTOR	10	х						0	0	0
BRAD CONROY DIRECTOR	1 0	х						0	0	0
JONATHAN COOKLER DIRECTOR/VICE CHAIRMAN	10	х		х				0	0	0
SHIVA DELRAHIM DIRECTOR	10	х						0	0	0
ELLIOT DORFF DIRECTOR	10	х						0	0	0
JOSH FEFFER DIRECTOR	1 0 0 0	х						0	0	0
EDWARD FEINSTEIN DIRECTOR	1 0 0 0	х						0	0	0
JIM FELTON DIRECTOR	10	х						0	0	0
LARRY FREEMAN DIRECTOR	10	х						0	0	0
RODNEY FREEMAN DIRECTOR	1 0 0 0	х						0	0	0
NANCY GLASER DIRECTOR/SECRETARY	1 0 0 0	х		х				0	0	0
ABNER GOLDSTINE DIRECTOR	1 0 0 0	х						0	0	0
DANIEL GRYCZMAN DIRECTOR	1 0 0 0	х						0	0	0
ADA HORWICH DIRECTOR	1 0 0 0	х						0	0	0
LEON JANKS DIRECTOR	1 0 0 0	х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours more than one box, compensation compensation of other from the per unless person is both from related compensation organizations (Worganization (Wweek an officer and a from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Highest compensated employee Former Individual trustee or director Institutional hours organizations for emplo) ee related organizations below Trustee dotted line) 1 0 SHARON JANKS Χ 0 0 DIRECTOR 0 0 10 DAVID KAUFMAN 0 Х **DIRECTOR** 0 0 10 LAURIE KONHEIM 0 Χ 0 0 DIRECTOR 0 0 1 0 MARK LAINER Х 0 0 0 DIRECTOR 0 0 10 PETER LOWY Χ DIRECTOR 0 0 10 FRANK MAAS 0 0 0 Х DIRECTOR 0 0 10 VIRGINIA MAAS 0 0 0 Х DIRECTOR 0.0 1 0 SUE MELTZER Х 0 0 DIRECTOR 0 0 10 HEIDI MONKARSH Χ 0 0 DIRECTOR 0 0 10 JILL NAMM 0 0 0 Χ DIRECTOR 0.0 1 0 JULIE PLATT Χ 0 0 0 DIRECTOR 0 0 1 0 LARRY POST 0 Χ DIRECTOR 0 0 10 ALBERT PRAW 0 0 0 Х DIRECTOR 0 0 10 KEN PRESSBERG 0 Χ 0 0 DIRECTOR 0 0 1 0 EDWARD ROBIN Χ 0 0 DIRECTOR 0 0 10 ALAN ROSEN 0 0 0 Х DIRECTOR 0 0 10 RICHARD SANDLER 0 0 0 Х Х DIRECTOR/CHAIRMAN 0 0 1 0 JESSE SHARE Χ 0 0 0 **DIRECTOR** 0 0 1 0 BRIAN SHIRKEN Х 0 0 0 DIRECTOR 0 0 10 TERRI SMOOKE 0 0 0 Х Χ DIRECTOR/TREASURER 0 0 1 0 GLENN SONNENBERG Χ 0 0 0 DIRECTOR 0.0 1 0 IRV WEINTRAUB Χ 0 0 0 DIRECTOR 0 0 10 BRIAN WEISBERG Χ 0 0 0 DIRECTOR 0 0 10 STEVEN WINDMUELLER 0 Х 0 0 DIRECTOR 0 0 1 0 RICHARD ZIMAN 0 DIRECTOR 0 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

38 0

0 0

0 0

JOHN MAGOULAS

SUSAN GOTLIB

SVP CAMPAIGN DIRECTOR

FORMER KEY EMPLOYEE

compensated Employees, and indepen		CLUIS						1	1	
<b>(A)</b> Name and Title	(B) Average hours per week (list		than	not one son i er an	box s bo d a	,		(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
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			related organizations
JAY SANDERSON PRESIDENT/CEO	38 0 0 0			х				420,870	0	46,200
IVAN WOLKIND CFO/COO	38 0 0 0			х				273,325	0	29,232
John Fishel President/CEO (Part Year)	20 0 0 0			х				246,763	0	77,942
NANCY SACKS EVP DEVELOPMENT OFFICER	38 0 0 0				х			267,468	0	31,386
ANDREW CUSHNIR EVP CHIEF PROGRAM OFFICER	38 0 0 0				х			189,679	0	64,706
CAROL KORANSKY EVP DIRECTOR VALLEY ALLIANCE	38 0 0 0					х		205,608	0	56,200
JONATHAN JACOBY SVP ENSURING THE JEWISH FUTURE	38 0 0 0					х		166,332	0	16,999
MARLA ABRAHAM SVP ENDWMENT PLEDGE & PREMIERE	38 0 0 0					х		163,783	0	12,157
CYNTHIA AYALA SVP ADMINISTRATION AND HR	38 0 0 0					х		168,197	0	39,685

Χ

Х

160,853

146,867

45,341

0

0

0

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As Filed Data -

DLN: 93493314023994

**Employer identification number** 

OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

JEWISH FEDERATION COUNCIL OF GREATER LA

Department of the Treasury Internal Revenue Service

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

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

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

Inspection

									95-1643.		
	rt I			blic Charity Sta						nstruction	S
Γhe	organı:		•	e foundation becaus	,			•	•		
1	Г		-	on of churches, or a				ection 170(	b)(1)(A)(i).		
2	Γ	A scho	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Schedı	ıle E )				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descrı	bed in <b>sectio</b>	n 170(b)(1	)(A)(iii).		
4	Γ	A medi	cal research	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in <b>se</b>	ction 170(b)(	(1)(A)(iii).	Enter the
	_			ty, and state							
5	ı	-	•	erated for the benefi	-	or universit	ty owned or o	perated by	a governmen	tal unit des	scribed in
		sect ion	170(b)(1)(	A)(iv). (Complete P	art II )						
6	Γ	A feder	al, state, or	local government or	government	al unit desc	rıbed ın <b>secti</b>	on 170(b)(	1)(A)(v).		
7	굣	_		at normally receives			support from	a governm	ental unıt or f	rom the ge	neral public
8	_			on 170(b)(1)(A)(vi). described in <b>sectior</b>			nnlete Part II	1			
9	<u>'</u> _		-	at normally receives			-	-	butions, mem	bership fee	es, and gross
-	•	_		ities related to its ex					•	•	· -
		· · · · · · · · · · · · · · · · · · ·		oss investment inco	•	=					
		•		janization after June				•			
10	$\vdash$	•		ganized and operated	•			•	•		
11	<u>'</u>	_		ganized and operated						to carry ou	t the nurnoses of
	'			ly supported organiz							
				bes the type of supp							
		a [	Type I	b	Type II	I - Function	ally integrate	d <b>d</b> $\Gamma$	Type III - N	on-functior	nally integrated
е	Γ	•	_	ox, I certify that the	_				, ,		•
				on managers and ot	her than one	or more pub	licly support	ed organıza	tions describ	ed in secti	on 509(a)(1) or
f			509(a)(2)	received a written de	atarmination	from the ID	C that it is a "	Tuno I Tur	o II or Tuno	III cuppoi	ting organization
•			this box	received a writteri di	etermination	nom the 1K.	S that it is a	Type I, Typ	Je II, OI Type	III Suppoi	
g				2006, has the organi	zation accep	ted any gift	or contribution	on from any	of the		,
			ng persons?								
		. , .		irectly or indirectly o	•		•	persons de	scribed in (ii)	·	Yes No
		and (III	) below, the	governing body of th	ie supported	organızatıor	1?				.g(i)
		(ii) A fa	amily memb	er of a person descr	bed in (i) abo	ove?				11	g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11	g(iii)
h		Provide	the following	ng information about	the supporte	ed organizati	ion(s)				
									_		
•	i) Nan		(ii) EIN	(iii) Type of	( <b>iv)</b> Is t		(v) Did you	•	(vi) Is		(vii) A mount of
	suppoi			organization	organizati		the organiz		organizat		monetary
O	rganiz	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor	•	col (i) org		support
				or IRC section	docume	_	Заррог		I III tile o	J .	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
							1.55		1	+	+
										+	+
									+	+	+

supported organization

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 55,195,584 48,472,169 49,553,438 45,503,542 44,804,424 243,529,157 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 55,195,584 48,472,169 49,553,438 45,503,542 44,804,424 243,529,157 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 5,745,634 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 237,783,523 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (c) 2010 (d) 2011 (a) 2008 (e) 2012 (f) Total beginning in) 🟲 55, 195, 584 45,503,542 Amounts from line 4 48,472,169 49,553,438 44,804,424 243,529,157 Gross income from interest, dividends, payments received on securities loans, rents, royalties 1,398,289 980,671 827,410 1,057,288 1,755,379 6,019,037 and income from similar sources Net income from unrelated business activities, whether or 613,490 613,490 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 7 250,161,684 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 95 052 % Public support percentage for 2011 Schedule A, Part II, line 14 15 96 242 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization 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 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 b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493314023994

### OMB No 1545-0047

Inspection

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

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

Political Campaign and Lobbying Activities

- 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-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

**(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

**f** Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l <b>.</b> )		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT
	filed Form 5768 (election under section 501(h)).

	and Was " represented the of the supplied to be a supplied to the supplied of the supplied of the supplied to	(a	1)	(b)
	ach "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?	Yes		62,692
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	O ther activities?		Νo	
j	Total Add lines 1c through 1i			62,692
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?		No	
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		Ī	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No	
ar	t III-A Complete if the organization is exempt under section $501(c)(4)$ , section	n 501(c	(5), o	r section

## Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 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	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

# Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

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).		
а	Current year	2a	
b	Carryover from last year	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?	4	

### Part IV Supplemental Information

Taxable amount of lobbying and political expenditures (see instructions)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
LOBBYING EXPENSE	SCHEDULE C, PART II-B, LINE 1F	THE JEWISH PUBLIC AFFAIRS COMMITTEE OF CALIFORNIA
ALLOCATIONS		(JPAC) IS THE LARGEST SINGLE STATE COALITION OF
		JEWISH ORGANIZATIONS IN THE NATION JPAC IS
		COMPRISED OF JEWISH FEDERATIONS, JEWISH
		COMMUNITY RELATIONS COMMITTEES, AND OTHER
		CALIFORNIA BASED JEWISH ORGANIZATIONS JPAC
		TAKES POSITIONS ON LEGISLATION DEALING WITH
		ISSUES IMPORTANT TO THE JEWISH COMMUNITY, SUCH
		AS CIVIL RIGHTS, SEPARATION OF CHURCH AND STATE,
		SOCIAL SERVICE DELIVERY, AND PUBLIC EDUCATION
		JPAC ALSO ADVOCATES ON THE FULL RANGE OF JEWISH
		COMMUNITY CONCERNS, INCLUDING SUPPORT ON
		BEHALF OF JEWISH SOCIAL SERVICE PROVIDER
		AGENCIES THAT SERVE THE POPULATION AT LARGE
		JPAC SERVES AS A RESOURCE TO LEGISLATORS ON
		VARIOUS POLICY MATTERS LOBBYING ALLOCATION TO
		JPAC IS \$62,692

5

DLN: 93493314023994

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► 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.

**Supplemental Financial Statements** 

Open to Public

Internal Revenue Service ► Attach to For			m 990. ► See separate instructions.		Inspection
Name of the organization JEWISH FEDERATION COUNCIL OF GREATER LA				Employer identif	ication number
				95-1643388	
Pa		nizations Maintaining Donor Adv		ınds or Accour	nts. Complete if the
	organi	zation answered "Yes" to Form 990	, Part IV, line 6.  (a) Donor advised funds	(h) Funds at	nd other accounts
1	Total number a	at end of vear	(a) Donor advised funds	(b) I dilus di	id other accounts
2		ntributions to (during year)			
3		nts from (during year)			
4		ue at end of year			
5		zation inform all donors and donor adviso organization's property, subject to the or		or advised	┌ Yes ┌ No
6	used only for d	zation inform all grantees, donors, and do charitable purposes and not for the benef permissible private benefit?			┌Yes ┌No
Pa		ervation Easements. Complete if	the organization answered "Yes" to	Form 990, Part	: IV, line 7.
2	Preservati Protection Preservati Complete line	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a	or education) Preservation of an Preservation of a c	ertified historic st	ructure
	easement on t	the last day of the tax year	Г	Uold at 1	he End of the Year
а	Total number	of conservation easements		2a	ne End of the Year
b		restricted by conservation easements	ľ	2b	
c		nservation easements on a certified history	oric structure included in (a)	2c	
d	Number of con	nservation easements included in (c) acq cure listed in the National Register	•	2d	
3	Number of con	nservation easements modified, transferr	ed, released, extinguished, or terminate	d by the organizati	on during
	the tax year 🕨	<u></u>			
4	Number of sta	tes where property subject to conservati	on easement is located ►		
5	Does the orga	nization have a written policy regarding to fixe the conservation easements it holds?		— Iling of violations, a	and Yes No
6	Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easen	nents during the ye	ar
7	·	penses incurred in monitoring, inspecting	, and enforcing conservation easements	during the year	
8	Does each cor	nservation easement reported on line 2(o	d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i	)
9	In Part XIII, d balance sheet	70(h)(4)(B)(II)? describe how the organization reports cor r, and include, if applicable, the text of the	e footnote to the organization's financial		nt, and
Paı	rt IIII Organ	on's accounting for conservation easeme nizations Maintaining Collection lete if the organization answered "Y	s of Art, Historical Treasures, o	or Other Simila	ır Assets.
1a	If the organiza works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its rever ts held for public exhibition, education, o	or research in furth	
b	works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education, o		
	(i) Revenues	included in Form 990, Part VIII, line 1		<b>►</b> \$	
	(ii) Assets inc	cluded in Form 990, Part X		<b>-</b> \$	
2	If the organiza	ation received or held works of art, histor unts required to be reported under SFAS		r financial gain, pro	
а	Revenues incl	uded in Form 990, Part VIII, line 1		<b>►</b> \$	
				· + <u>—</u>	

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	, His	torical Tr	easures,	or Othe	er Similar	Asse	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, cł	neck any of t	he following:	that are	a sıgnıfıcant	use of	ıts	
а	Public exhibition		d	┌ Loan	or exchange	program	s			
b	Scholarly research		e	┌ Other	-					
С	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	w they furthe	er the organi	zatıon's e	xempt purpo	se in		
5	During the year, did the organization solicit						mılar	_		_
	assets to be sold to raise funds rather than								Yes	l No
Par	<b>Escrow and Custodial Arrang</b> Part IV, line 9, or reported an ar	•				werea "	res" to Fori	n 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					er assets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follov	wing table			_			
								Amou	ınt	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					<b>1</b> f				
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?	ı				Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anation has l	been provide	ed in Part	XIII			Г
Pa	rt V Endowment Funds. Complete									
1-	Daniming of warmhalance	(a)Current year 67,264,208	(b)	Prior year 72,141,000		rs back (d) 183,050	Three years ba 62,755,2	_		ears back 6,457,008
1a L	Beginning of year balance	1,055,573		1,559,930		704,612	4,431,6	_		3,757,236
b	Contributions	1,033,373		1,339,930	2,7	04,012	7,731,0	772		3,737,230
С	Net investment earnings, gams, and losses	9,330,396		-626,730	7,6	529,912	9,831,	768	-2	3,791,413
d	Grants or scholarships									
е	Other expenditures for facilities and programs	3,319,758		5,662,869	11,2	260,328	3,728,4	153		3,552,000
f	Administrative expenses	195,702		147,123	1	16,246	107,2	250		115,538
g	End of year balance	74,134,717		67,264,208	72,1	141,000	73,183,0	)50	6	2,755,293
2	Provide the estimated percentage of the cur	rent year end baland	ce (lın	ne 1g, colum	n (a)) held a	ıs				
а	Board designated or quasi-endowment	86 840 %								
ь	Permanent endowment ► 6 490 %									
c		70 %								
Ĭ	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	ation	that are held	d and admin	stered fo	r the			
	organization by						-		Yes	No
	(i) unrelated organizations							3a(i)	Yes	
b	(ii) related organizations	ne lieted as require	 dan C					3a(ii) 3b	Yes	
		iis iisted as required		chedule K			[	30	165	
_		ne organization's en	dowm	ent funds						
4	Describe in Part XIII the intended uses of t				10.					
4					other (b)Co	ost or other is (other)	(c) Accumul		( <b>d</b> ) Boo	ok value
4 Par	Describe in Part XIII the intended uses of the transfer of the			art X, line 1	other (b)Co		depreciation			ok value 2,463,991
4 Par	Describe in Part XIII the intended uses of the triangle of the triangle of the triangle of the triangle of the triangle of the triangle of			art X, line 1	other (b)Co	s (other)	depreciation	on		
Par	Describe in Part XIII the intended uses of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of transfer of the transfer of transfer of the transfer of transfer of the transfer of tra			art X, line 1	other (b)Co	2,463,991	depreciation	on		2,463,991
1a b	Describe in Part XIII the intended uses of the tall tall tall tall tall tall tall tal			art X, line 1	other (b)Co	2,463,991	depreciation 12,889	on		2,463,991
1a   c   d	Describe in Part XIII the intended uses of the tall two talls. The tall the intended uses of the tall two talls. The tall talls are tall talls and tall talls are tall talls. The tall talls are tall talls are tall talls are tall talls are tall talls. The tall talls are tall talls are talls are tall talls are talls are talls are tall talls are talls are talls are talls are tall talls are talls are talls are tall talls are tall are talls are tall			art X, line 1	other (b)Co	s (other) 2,463,991 26,671,171	12,88i	on 0,978	1:	2,463,991 3,790,193

Part VIII Investments—Other Securities. See F	<u>orm 990, Part X, line 12</u>	<u>2.                                    </u>	
(a) Description of security or category	<b>(b)</b> Book value		d of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)Other			
(A) JEWISH COMMUNITY FOUNDATION	43,479,258		F
	<u>'</u>		
	<u>'</u>		
	\		
	\		
	<u>'</u>		
	<u>'</u>		
	42.470.250		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	43,479,258		
Part VIII Investments—Program Related. See			
(a) Description of investment type	<b>(b)</b> Book value		od of valuation
		Cost or end-o	f-year market value
	<u>'</u>		
	\		
	\		
	<u>'</u>		
	\		
	<u>'</u>		
Total. (Column (h) must equal Form 990, Part X, col (B) line 13.)			
Total (column (b) most equal remi sse, rare x, cor (b) mic 1s y	1.5		
Part IX Other Assets. See Form 990, Part X, lin			(I) Dealers I.e.
(a) Descrip	:ion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.	)		
Part X Other Liabilities. See Form 990, Part X	, lıne 25.		
Part X Other Liabilities. See Form 990, Part X  (a) Description of liability	, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part X	, lıne 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of liability  Federal income taxes	, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part X  (a) Description of liability	, line 25. (b) Book value 0		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY	, line 25. (b) Book value  0  500,000  950,143		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY	, line 25. (b) Book value  0  500,000  950,143  34,310		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310		
Part X Other Liabilities. See Form 990, Part X  (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25. (b) Book value  0  500,000  950,143  34,310  181,491		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)  OTHER LIABILITIES	, line 25.  (b) Book value  0 500,000 950,143 34,310 181,491 2,828,051		
Part X Other Liabilities. See Form 990, Part X,  1 (a) Description of liability  Federal income taxes  OTHER DEFERRED COMPENSATION  DB PENSION PLAN PAYABLE EMPLOY  DC PENSION PLAN PAYABLE EMPLOY  DEFERRED COMPENSATION - 457(B)	, line 25.  (b) Book value  0 500,000 950,143 34,310 181,491 2,828,051		

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	61,804,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	6,758,026
3	Subtract line <b>2e</b> from line <b>1</b>	3	55,045,974
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 120,752		
b	Other (Describe in Part XIII )		
C	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	3,715,518
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	58,761,492
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Returi	1
1	Total expenses and losses per audited financial statements	1	45,929,617
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	45,929,617
4	A mounts 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 120,752		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	3,715,517
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	49,645,134
Part	XIII Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
INTENDED USES OF ENDOWMENT	SCHEDULE D, PART V, LINE 4	THE BOARD DESIGNATED ENDOWMENT IS INTENDED TO PROVIDE ONGOING SUPPORT FOR THE ORGANIZATION THROUGH AN ANNUAL DISTRIBUTION THE ANNUAL DISTRIBUTION IS BASED ON A SPENDING RATE OF 5% CALCULATED BASED ON THE TWELVE QUARTERS AVERAGE BALANCE AT SEPTEMBER 31 ADDITIONALLY, THE BOARD DESIGNATED ENDOWMENT MAY BE USED TO SUPPORT SIGNIFICANT OPERATING OR PROGRAM INITIATIVES THAT EXCEED THE PROJECTED ANNUAL REVENUE AND EXPENSE BUDGET DISTRIBUTIONS THAT EXCEED THE ANNUAL SPENDING RATE ARE APPROVED BY THE BOARD OTHER ENDOWMENT FUNDS ARE INTENDED TO A) PROVIDE AN ENDOWMENT TO MATCH AREA JEWISH DAY SCHOOLS SCHOLARSHIP DISTRIBUTIONS, B) PROVIDE FUNDS FOR CAPITAL IMPROVEMENTS TO THE FEDERATION'S FACILITIES, AND C) PROVIDE SUPPORT FOR CAMPING PROGRAMS
FIN 48 FOOTNOTE	SCHEDULE D, PART X, LINE 2	THE FEDERATION IS EXEMPT FROM FEDERAL INCOME AND CALIFORNIA FRANCHISE TAXES UNDER SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE AND CORRESPONDING CALIFORNIA REVENUE AND TAXATION CODE SECTIONS, RESPECTIVELY ADDITIONALLY, THE FEDERATION HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE REPORTING OR DISCLOSURE IN THE FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2012
EXPLANATION OF OTHER ADJUSTMENTS	SCHEDULE D, PART XI, LINE 4B	THE \$3,594,766 IS COMPRISED OF A RECLASS OF RENTAL REVENUE FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$2,787,070, A RECLASS OF CARS EXPENSES FROM REVENUE REPORTED IN THE AUDITED FINANCIAL STATEMENT TO EXPENSE REPORTED ON THE 990 OF \$16,267, A RECLASS OF FUNDRAISING NET INCOME FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$574,528, AND A RECLASS OF OTHER INCOME FROM EXPENSES ON THE AUDITED FINANCIAL STATEMENTS TO REVENUE REPORTED ON THE 990 of \$216,900
EXPLANATION OF OTHER ADJUSTMENTS	SCHEDULE D, PART XII, LINE 4B	THE \$3,594,765 IS COMPRISED OF A RECLASS OF RENTAL REVENUE FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENTS TO EXPENSE REPORTED ON THE 990 OF \$2,787,070, A reclass of car expenses from revenue reported on the audited financial statements to expense reported on the 990 of \$16,267, A RECLASS OF FUNDRAISING NET INCOME FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$574,528, AND A RECLASS OF OTHER INCOME FROM EXPENSES ON THE AUDITED FINANCIAL STATEMENTS TO REVENUE REPORTED ON THE 990 of \$216,900

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

As Filed Data -

DLN: 93493314023994

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public **Inspection** 

Schedule F (Form 990) 2012

	e of the organization				Employer ident	ification number
JEW]	ISH FEDERATION COUNCIL OF	GREATER LA			95-1643388	
Pa	rt I General Information "Yes" to Form 990, Par			<b>e United States.</b> Co	omplete if the organiz	ation answered
1	<b>For grantmakers.</b> Does the cassistance, the grantees' eligible the grants or assistance?	jibility for the g	grants or assis	tance, and the selection	on criteria used to awa	
2	<b>For grantmakers.</b> Describe in the United States.	n Part V the org	ganızatıon's pr	ocedures for monitorii	ng the use of grant fu	nds outside
3	Activites per Region (The follow	nng Part I, line 3	table can be du	plicated if additional spa	ce is needed )	
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	
(1)	) Middle East and North Africa	1	23	Program Services	See Part V	805,01
( 2)	) Middle East and North Africa			Grantmakıng		26,00
( 3)						
(4)						
( 5)						
	Sub-total Total from continuation sheets to Part I	1	23			831,01
	Totals (add lines 3a and 3b)	1	23			831.01

Cat No 50082W

Part IV	, line 15, for an	<u>y recipient who rece</u>	ived more than \$5,	<u>000. Part II can be</u>	<u>duplicated if additio</u>	nal space is needed		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Middle East and North Africa	GENERAL SUPPORT	26,000	CHECK			
(2)								
(3)								
(4)								
		ent organizations list or which the grantee					as 	1
3 Enter total n	umber of other	organizations or ent	rities					0

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							
( 2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
( 12)							
(13)							
(14)							
( 15)							
( 16)							
( 17)							
( 18)							
	1			l .			

### Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	⊽	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	<u> </u>	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u> ~</u>	Νo

Schedule F (Form 990) 2012

### Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	ReturnReference	Explanation
See Additional Data		
	•	Schodulo E (Form 000) 2012

### **Additional Data**

Software ID: Software Version:

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

### Form 990 Schedule F - Supplemental Information

Identifier	ReturnReference	Explanation
ORGANIZATION'S PROGRAM SERVICE ACTIVITY	SCHEDULE F, PART I, LINE 2 AND PART I, LINE 3, COLUMN E	THE JEWISH FEDERATION OF LOS ANGELES' ISRAEL OFFICE OVERSEES THE JEWISH FEDERATION'S POLIC IES, PROGRAMS, ALLOCATIONS, AND INSTITUTIONAL RELATIONSHIPS IN ISRAEL SUPPORT FOR, AND THE RELATIONSHIPS WITH, THE PEOPLE OF ISRAEL ARE KEY ASPECTS OF THE FEDERATION'S MISSION THE ISRAEL OFFICE PROVIDES COORDINATION FOR OVERSEAS VISITS TO ISRAEL BY MISSIONS, INDIVIDUA LS, FAMILIES, ELECTED OFFICIALS, INTER-ETHNIC AND INTER-RELIGIOUS LEADERS AND EDUCATORS THE ISRAEL OFFICE REPRESENTS THE FEDERATION WITH THE JEWISH AGENCY FOR ISRAEL, THE JOINT DI STRIBUTION COMMITTEE, THE JEWISH FEDERATION OF NORTH AMERICA, UNITED ISRAEL APPEAL, ISRAEL OFFICES OF OTHER JEWISH FEDERATIONS, ISRAELI GOVERNMENT MINISTRIES, THE UNITED STATES EMB ASSY, MUNICIPALITIES IN ISRAEL, ACADEMIC INSTITUTIONS, AND ISRAELI NON-GOVERNMENTAL ORGANI ZATIONS EXPENDITURES FOR THE OFFICE IN ISRAEL AMOUNT TO \$237,129 The expenditures related to our community missions to Israel and all related costs are also on this line and amount to \$567,883 GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS OUTSIDE THE US SCHEDULE F, PART II THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501(C)(3) DOMESTIC US CHAR ITY IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSID IARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501 (C) (3) ORGANIZATIONS EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULE F THE JFNA GRANT IS REPORTED ON SCHEDULE I, PART II

### Form 990 Schedule F - Supplemental Information

	Identifier	ReturnReference	Explanation
METI			THE AMOUNT OF EXPENDITURES WAS DETERMINED USING THE ACCRUAL METHOD OF ACCOUNTING

DLN: 93493314023994

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

## **Supplemental Information Regarding**

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** JEWISH FEDERATION COUNCIL OF GREATER LA

95-1643388 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations e Solicitation of non-government grants f Solicitation of government grants ✓ Internet and email solicitations Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No TFI F SIEGEL MARKETING Νo 269,789 64.470 232,319 FUNDRAISING 10 269,789 64,470 232,319 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II		<b>Fundraising Events.</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.					
			(a) Event #1  REC DINNER (event type)	(b) Event #2  LEGAL SERVICES (event type)	(c) Other events  18 (total number)	(d) Total events (add col (a) through col (c))	
Revenue	1	Gross receipts	1,846,767	650,799	7,823,919	10,321,485	
	2	Less Contributions	1,082,594	311,649	7,266,600	8,660,843	
	3	Gross income (line 1 minus line 2)	764,173	339,150	557,319	1,660,642	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes					
	6	Rent/facility costs			13,806	13,806	
	7	Food and beverages .	241,016	109,182	376,583	726,781	
	8	Entertainment	2,500	0	74,445	76,945	
	9	Other direct expenses .	17,608	11,623	239,351	268,582	
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(1,086,114)	
	11	Net income summary Combine li			•	574,528	
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo		
Revenue	1	Gross revenue	(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
Direct Expenses		Cash prizes					
	3	Non-cash prizes					
	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor	Г Yes Г Nо	Г Yes	┌ Yes		
		7 Direct expense summary Add lines 2 through 5 in column (d)					
	8 Net gaming income summary Combine lines 1 and 7 in column (d)						
9 a b	Ist	Enter the state(s) in which the organization operates gaming activities  Is the organization licensed to operate gaming activities in each of these states?					
10a b	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No.						

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
<b>.6</b>	Gaming manager information			
	Name 🟲			
	Gaming manager compensation <b>I</b>	<b>\$</b> \$		
	Description of services provided	<b>&gt;</b>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г <sub>Yes</sub> Г <sub>No</sub>
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990 OMB No 1545-0047

2012

DLN: 93493314023994

Open to Public

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Name of the organization						Employer identificati	on number
JEWISH FEDERATION COUNCIL O	) F GREATER LA					95-1643388	
Part I General Informati	on on Grants and	d Assistance					
<ol> <li>Does the organization maintain the selection criteria used to a</li> <li>Describe in Part IV the organi</li> </ol>	award the grants or as zatıon's procedures fo	sistance? or monitoring the use o	f grant funds in the Unite	ed States			▼ Yes
				e <b>United States.</b> Con art II can be duplicate			es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Addıtıonal Data Table							
2 Enter total number of section 5						_	126
3 Enter total number of other org	yanızations listed in tr	ie iine i tapie				<u> </u>	0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	( <b>d)</b> A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS		THE RESPONSIBILITY FOR MONITORING GRANT AND PROGRAM DISTRIBUTIONS IS DISTRIBUTED TO THE THREE STRATEGIC INITIATIVES ENSURING THE JEWISH FUTURE, CARING FOR JEWS IN NEED AND COMMUNITY ENGAGEMENT EACH STRATEGIC INITIATIVE IS MANAGED BY PROFESSIONAL STAFF AND VOLUNTEERS WHO WORK TOGETHER TO IDENTIFY COMMUNITY NEEDS WITHIN THAT STRATEGIC INITIATIVE AREA THE STAFF AND VOLUNTEERS ARE RESPONSIBLE FOR DEVELOPING AN ANNUAL BUDGET AND FOR COMMUNICATING NEW PROGRAM NEEDS THAT MAY ARISE DURING THE YEAR TO EXECUTIVE MANAGEMENT, THE STRATEGIC PLANNING AND DISTRIBUTION COMMITTEE AND THE BOARD ADDITIONALLY, THEY MAY WORK WITH GRANTORS AND CONTRIBUTORS WHO FUND RESTRICTED PROGRAMS ON AN ANNUAL BASIS, PROGRAM MANAGEMENT PROPOSES A BUDGET WHICH IS APPROVED BY THE BOARD OF DIRECTORS THROUGHOUT THE YEAR, PROGRAM STAFF MONITORS THE DISTRIBUTIONS AGAINST BUDGETED ALLOCATIONS EACH STRATEGIC INITIATIVE PERFORMS 6-MONTH AND 1-YEAR EVALUATIONS OF EVERY PROGRAM IT FUNDS, INCLUDING A REQUEST FOR ALL RELEVANT FINANCIAL DATA FROM THE ORGANIZATION FUNDED ADDITIONALLY, THE PROGRAM STAFF MONITORS THE PROGRAM CONTENT OF RESTRICTED GRANTS
FORM 990, SCHEDULE I, PART II		THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501(C)(3) DOMESTIC U S CHARITY IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSIDIARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501 (C)(3) ORGANIZATIONS EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULE F

Software ID:

**Software Version:** 

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

**Return to Form** 

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
30 Years After1880 Century Park E Ste 1100 LA,CA 90067	26-1748436	501(c)(3)	59,600				General Support
Abraham Joshua Heschel Day School17701 Devonshire St Northridge, CA 91325	95-2794822	501(c)(3)	74,375				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Adat Arı El12020 Burbank Blvd Valley VILLAGE,CA 91607	23-7366318	501(c)(3)	73,460				Scholarships & Student Financial Aid
Alpha Epsilon Pi Foundation Inc8815 Wesleyan Road Indianapolis,IN 46268	13-6141078	501(c)(3)	8,100				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Jewish University 15600 Mulholland Drive Bel Air, CA 90077	95-1684064	501(c)(3)	44,333				General Support
Bais Chana Chabad High School9017 W Pico Blvd Los Angeles, CA 90035	20-4396621	501(c)(3)	19,000				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Bais Chaya Mushka School for Girls9051 W Pico Blvd Los Angeles,CA 90035	95-4339460	501(c)(3)	23,000				Student Financial Aid
Bais Yaakov School for Girls 7353 Beverly Blvd Los Angeles, CA 90036	95-3127279	501(c)(3)	56,750				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	(h) Purpose of grant or assistance
Beit T'shuvah8831 Venice Blvd LA,CA 900340000	77-0152646	501(c)(3)	150,600				Local Agency Support
Bet Tzedek Legal Services 3250 Wilshire Blvd 13th Fl LA,CA 90010	23-7304205	501(c)(3)	230,000				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Beth Shir Shalom1827 California AvE Santa Monica,CA 90403	95-1551433	501(c)(3)	12,795				Student Financial Aid
Bikur Cholim8489 W3rd St 1004 Los Angeles, CA 90048	95-4521980	501(c)(3)	25,000				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Birthright Israel Foundation 33 East 33rd Street 7th Fl NY,NY 10016	13-4092050	501(c)(3)	891,356				General Support
Bnos Devorah High School 461 N La Brea Avenue Los Angeles,CA 90036	20-8992789	501(c)(3)	18,000				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Brawerman Elementary School11661 W Olympic Blvd LA,CA 90064	95-1691339	501(c)(3)	92,410				Student Financial Aid & General support
Breed Street Shul Project Inc 6505 Wilshire Blvd Ste 370 LA,CA 90048	95-4828764	501(c)(3)	18,250				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bureau Of Jewish Education 6505 Wilshire Blvd Ste 300 LA,CA 90048	95-4280178	501(c)(3)	1,286,521				Local Agency Support
Camp Akıba5249 S Sepulveda Culver Cıty, CA 90230	95-1932032	501(c)(3)	14,000				Camp Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Alonim1101 Peppertree Lane Brandeis,CA 93064	95-1684064	501(c)(3)	213,250				Camp Grants
Camp JCA Shalom34342 Mulholland Highway Malibu,CA 90265	84-1652923	501(c)(3)	223,750				Camp Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Mountain Chai4950 Murphy Canyon Road San Diego, CA 92123	91-2150831	501(c)(3)	14,750				Camp Grants
Camp Newman235 Montgomery St 1120 SF, CA 94104	94-1480908	501(c)(3)	24,500				Camp Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Ramah in California Inc17525 Ventura Ste 201 Encino,CA 91316	95-1843131	501(c)(3)	211,750				Camp Grants
Camp Tawonga131 Steuart Street Ste 460 SF,CA 94105	94-3227261	501(c)(3)	7,250				Camp Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Casa Pacıfica1722 S LEWIS RD 2416 Camarıllo,CA 93012	77-0195022	501(c)(3)	5,500				General Support
Celebrating Israel LLC5900 Canoga 300 Woodland Hills, CA 91367	45-4347608	501(c)(3)	50,000				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chabad at USC2713 Severance St Los Angeles,CA 90007	61-1442258	501(c)(3)	6,000				General Support & Scholarship
Chabad of Conejo30345 Canwood Street Agoura Hills,CA 91301	42-1607378	501(c)(3)	27,500				General Support/Camp & Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Chai Lifeline9701 West Pico Blvd Ste 120 LA,CA 90035	11-2940331	501(c)(3)	30,000				General Support
Cheder Menachem Mendel 1606 S La Cienega Blvd LA,CA 90035	95-4434095	501(c)(3)	35,750				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Conejo Jewish Day School 29900 Ladyface Ct Agoura Hills,CA 91301	95-4823692	501(c)(3)	18,120				Student Financial Aid
Congregation Ner Tamid 5721 Crestridge Rd Palos Verdes, CA 90275	95-2546462	501(c)(3)	27,955				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Emek Hebrew Academy 15365 Magnolia Blvd Sherman Oaks,CA 91403	95-6006492	501(c)(3)	59,750				Student Financial Aid
Etta Israel Center12722 Riverside 105 N Hollywood,CA 91607	95-4308644	501(c)(3)	85,000				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Foundation for Jewish Culture PO Box 489 New York, NY 10011	13-1927751	501(c)(3)	56,589				General Support
Friends of Israel Scouts Inc 50 West 58th Street New York, NY 10019	13-3843506	501(c)(3)	17,250				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Friendship Circle Los Angeles9581 West Pico Blvd Ste 102 LA,CA 90035	20-3270890	501(c)(3)	38,322				General Support
Gateways Hospital1891 Effie Street LA,CA 900260000	95-1691011	501(c)(3)	30,000				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Habonim Dror Camp Gilboa 8339 W 3rd St LA,CA 90048	95-1929706	501(c)(3)	41,250				Camp Grants & Scholarships
Harkham Hillel Hebrew Academy9120 West Olympic Beverly Hills,CA 90212	95-1662972	501(c)(3)	85,380				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hebrew Union Colg-Jewish Inst of Religion3077 University Avenue LA,CA 90007	31-0537067	501(c)(3)	21,897				Support for Interns & Graduate Student Stipends
Heschel West27400 W Canwood Street Agoura,CA 91301	95-4661185	501(c)(3)	12,830				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IKAR5870 W Olympic Blvd Los Angeles,CA 90036	20-1210098	501(c)(3)	20,000				General Support
Ilan Ramon Day School 27400 W Canwood Street Agoura,CA 91301	95-4661185	501(c)(3)	23,250				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
JAMAshreinu369 N Fairfax 4 Los Angeles, CA 90036	95-4178454	501(c)(3)	12,500				Youth Programs
JConnect Inc1801 Avenue of the Stars 322 LA,CA 90067	20-2765454	501(c)(3)	11,220				Event Sponsorship

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Jewish Big Brothers Big Sisters6505 Wilshire Blvd 6th Fl LA,CA 90048	95-1691009	501(c)(3)	276,068				Local Agency Support
Jewish Community and Recreation Center22622 Vanowen St West Hills, CA 91307	02-0589575	501(c)(3)	846,312				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Jewish Family Service of Los Angeles3580 Wilshire Blvd STE 700 LA,CA 90010	95-1691013	501(c)(3)	3,184,429				Local Agency Support
Jewish Free Loan6505 Wilshire Blvd 7th Fl LA,CA 90048	95-1691014	501(c)(3)	135,806				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Jewish Historical Society 6505 Wilshire Blvd Ste 370 LA,CA 90048	95-3941708	501(c)(3)	16,430				Local Agency Support
Jewish Student Union9831 W Pico Blvd 101 LA,CA 90035	61-1420053	501(c)(3)	66,000				Local Agency support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Jewish Studies Program Fdn Trust Fund18111 Nordhoff St 7th Northridge, CA 91330	95-6196006	501(c)(3)	10,000				General Support
Jewish Vocational Service 6505 Wilshire Blvd Los Angeles, CA 90048	95-1691012	501(c)(3)	557,638				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JQ International2138 Baxter St Los Angeles,CA 90039	68-0601176	501(c)(3)	64,000				General Support
Kadıma Academy7011 Shoup Avenue West Hılls,CA 91307	95-3190850	501(c)(3)	66,100				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kehillat Israel16019 Sunset Pacific Palisades, CA 90272	95-2056645	501(c)(3)	25,220				Emergency Cash Grant & Student Fınancıal Aıd
Kehillat Ma'arav1715 21st Street Santa Monica,CA 90404	95-3641143	501(c)(3)	5,200				Student Financial Aid and General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Leo Baeck Temple1300 N Sepulveda Blvd LA,CA 90049	95-1916026	501(c)(3)	20,420				Scholarships & Student Financial Aid
Los Angeles Hebrew High School5900 Sepulveda Blvd 560 Van Nuys, CA 91411	95-1644595	501(c)(3)	37,400				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Los Angeles Hillel Council 6505 Wilshire Blvd 450 LA,CA 90048	95-1831070	501(c)(3)	905,559				Local Agency Support
Los Angeles Museum of the Holocaust6435 Wilshire Blvd Ste 303 LA,CA 90048	46-0503824	501(c)(3)	35,000				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Los Angeles ORT Technical Institute69-30 Austin Street Forest Hills,NY 11375	13-3281910	501(c)(3)	39,102				General Support
Loyola Marymount University 1 LMU Drive Malone 301 LA,CA 90045	95-1643334	501(c)(3)	10,000				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Maimonides Academy310 N Huntley Los Angeles,CA 90048	95-3214146	501(c)(3)	67,805				Scholarships & Student Financial Aid
MATI Israelı Cultural Center at JCC Milken22622 Vanowen Street West Hills, CA 91307	27-5571355	501(c)(3)	16,000				General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mayyım Hayyım Lıvıng Waters Cmty Mıkveh1838 Washıngton Street Newton, MA 02466	31-1753931	501(c)(3)	25,000				General Support
Mesıvta Bırkas Yıtzchak 6022 W Pıco Blvd Los Angeles.CA 90035	38-3738151	501(c)(3)	18,000				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Mesıvta of Greater Los Angeles25115 Mureau Rd Hıdden Hılls,CA 91302	95-4621495	501(c)(3)	23,970				Student Financial Aid
Milken Community High School15800 Zeldins Way Los Angeles,CA 90049	95-4381008	501(c)(3)	18,900				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Milken Community Middle School15800 Zeldins Way Los Angeles,CA 90049	95-4381008	501(c)(3)	168,795				Student Financial Aid
Moishe Foundation1330 Broadway Suite 801 Oakland, CA 94612	26-2599786	501(c)(3)	22,885				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Moishe House339 Circle Ave 2 Charlotte, NC 28207	26-2599786	501(c)(3)	98,400				General Support
Moving Traditions115 West Avenue 102 Jenkintown,PA 19046	34-2015014	501(c)(3)	30,000				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NCSJ2020 K Street NW 7800 Washington, DC 20006	13-2700517	501(c)(3)	5,500				General Support
Ner Aryeh12422 Chandler Valley Vıllage,CA 91607	95-4118740	501(c)(3)	7,500				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
New Community Jewish High School7353 Valley Circle West Hills, CA 91304	95-4805188	501(c)(3)	251,800				Scholarships & Student Financial Aid
NFTYPO Box 443 Warwick, NY 10990	13-1663143	501(c)(3)	9,000				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ohr Haemet Institute1030 S Robertson Blvd LA,CA 90035	95-4491007	501(c)(3)	16,000				Student Financial Aid
Or Hachaim Academy6021 Laurel Cnyn North Hollywood, CA 91606	31-1777687	501(c)(3)	11,500				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PresenTense Group Inc131 West 86th Street New York, NY 10024	26-3301983	501(c)(3)	42,500				General Support
Pressman Academy1055 S La Cienega Blvd LA,CA 90048	95-1656370	501(c)(3)	96,210				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project Chicken SoupPO Box 480241 Los Angeles,CA 90048	95-4232540	501(c)(3)	20,000				General Support
Reboot44 W 28th St 8th Fl New York, NY 10001	57-1154844	501(c)(3)	34,000				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Shalhevet High School910 S Fairfax Avenue Los Angeles, CA 90036	95-4330860	501(c)(3)	67,080				Student Financial Aid
Shalom Hartman Institute of North AmericaOne Pennsylvania Plaza 1606 NY,NY 10119	13-3014387	501(c)(3)	30,000				Rabbinic Leadership Program Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Shalom Institute34342 Mulholland Highway Malibu,CA 90265	84-1652923	501(c)(3)	103,992				Local Agency Support
Shomrei Torah Synagogue 7353 Valley Circle West Hills, CA 91304	95-2153156	501(c)(3)	7,210				Student Financial Aid/Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h</b> ) Purpose of grant or assistance
Silverlake JCC1110 Bates Avenue Los Angeles,CA 90029	32-0003071	501(c)(3)	11,000				Education Grants
Sinai Akiba Academy10400 Wilshire Blvd Los Angeles,CA 90024	95-2103898	501(c)(3)	80,010				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sınaı Temple10400 Wilshire Blvd Los Angeles,CA 90024	95-2103898	501(c)(3)	16,910				Student Financial Aid/Education Grants
Slavin Childrens' Library 6505 Wilshire Blvd Ste 150 LA,CA 90048	95-4280178	501(c)(3)	47,917				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h</b> ) Purpose of grant or assistance
Stephen S Wise Temple 15500 Stephen S Wise Drive LA,CA 90077	95-6087552	501(c)(3)	78,675				Student Financial Aid/Education Grants
Temple Adat Elohim2420 E Hillcrest Dr Thousand Oaks, CA 91362	95-2596965	501(c)(3)	22,030				Student Financial Aid/Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Temple Ahavat Shalom 18200 Rınaldı Place Northridge, CA 91326	95-6122711	501(c)(3)	14,325				Student Financial Aid/Education Grants
Temple Aliyah6025 Valley Circle Woodland Hills,CA 91367	95-2236425	501(c)(3)	31,840				Student Financial Aid/Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Temple Beth Hillel12326 Riverside Dr Valley Village,CA 91607	95-1765175	501(c)(3)	38,130				Scholarships & Student Financial Aid
Temple Emanuel8844 Burton Way Beverly Hills,CA 90211	95-4377186	501(c)(3)	29,680				Student Financial Aid/Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Temple Etz Chaim1080 E Janss Road Thousand Oaks, CA 91360	95-6134243	501(c)(3)	6,700				Student Financial Aid
Temple Isaiah10345 West Pico Blvd Los Angeles, CA 90064	95-1691319	501(c)(3)	19,185				Student Financial Aid/Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h</b> ) Purpose of grant or assistance
Temple Israel of Hollywood 7300 Hollywood Blvd Los Angeles, CA 90046	95-1664124	501(c)(3)	61,955				Student Financial Aid/Education Grants
Temple Judea5429 Lindley Avenue Tarzana,CA 91356	95-6052095	501(c)(3)	43,185				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Temple Kol Tıkvah20400 Ventura Blvd Woodland Hılls,CA 91364	77-0005548	501(c)(3)	8,880				Emergency Cash Grant
Temple Menorah1101 Camino Real Redondo Beach, CA 90277	95-6006575	501(c)(3)	14,125				Student Financial Aid/Education Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Temple Ramat Zion17655 Devonshire St Northridge, CA 91325	95-6006496	501(c)(3)	7,515				Student Financial Aid/Emergency Cash Grant
The Jewish Federations of North America25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	8,651,893				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Survivor Mitzvah Project 2658 Griffith Park Blvd 299 LA,CA 90039	36-4630389	501(c)(3)	15,000				General Support
Tomchei ShabbosPO Box 481270 Los Angeles,CA 90048	75-3002144	501(c)(3)	49,300				General Support/Emergency Cash Grant

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Torat Hayım1210 S La Cıenega Blvd LA,CA 90035	95-4711877	501(c)(3)	14,000				Student Financial Aid
UC Santa Barbara Hillel781 Embarcadero d Mar Isla Vista,CA 93117	91-2054237	501(c)(3)	9,377				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UCLA FoundationFowler Museum UCLA Box 95149 LA,CA 90095	95-2250801	501(c)(3)	25,000				Scholarship and General Support
Univeristy of California at Los Angeles302 Royce Hall Los Angeles,CA 900951485	95-6006143	501(c)(3)	7,500				General Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount 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
University Synagogue11960 Sunset Blvd Los Angeles,CA 90049	95-1929625	501(c)(3)	11,880				Student Financial Aid/Education Grants
USY Israel Program820 Second Ave 10th Floor NY,NY 10017	13-1659707	501(c)(3)	5,500				Youth Programs

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Valley Beth Shalom15739 Ventura Blvd Encino,CA 91436	95-1890769	501(c)(3)	137,445				Scholarships & Student Financial Aid
Valley Beth Shalom Day School15739 Ventura Blvd Encino,CA 91436	95-1890769	501(c)(3)	20,260				Scholarships & Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Valley Outreach Synagogue 21818 Craggyview 104 Chatsworth, CA 91311	20-4256980	501(c)(3)	5,120				Education Grants
Valley Torah High School 12517 Chandler Valley Village,CA 91607	95-3165544	501(c)(3)	50,300				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Vista Del Mar Child & Family Service3200 Motor Avenue Los Angeles, CA 90034	95-1647832	501(c)(3)	66,300				Local Agency Support
Westside Jewish Community Center5870 West Olympic Blvd LA,CA 90036	95-1691010	501(c)(3)	235,401				Local Agency Support

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
Wilshire Boulevard Temple 3663 Wilshire Blvd Los Angeles, CA 90010	95-1691339	501(c)(3)	42,425				Student Financial Aid/Camp Grants
Wilshire Boulevard Temple Camps3663 Wilshire Blvd Los Angeles, CA 90010	95-1691339	501(c)(3)	95,750				Student Financial Aid/Camp Grants

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Yavneh Hebrew Academy 5353 W 3rd St Los Angeles, CA 90020	95-2117190	501(c)(3)	33,200				Student Financial Aid
Yeshiva Aharon Yaakov241 S Detroit Street Los Angeles,CA 90036	95-3405695	501(c)(3)	30,000				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Yeshıva Gedolah of Los Angeles5444 Olympıc Blvd Los Angeles,CA 90036	95-3298317	501(c)(3)	19,000				Student Financial Aid
Yeshiva Ohr Elchonon Chabad7215 Waring Avenue Los Angeles, CA 90046	95-4384473	501(c)(3)	33,750				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Yeshiva Rav Isacsohn540 N La Brea Avenue Los Angeles,CA 90036	95-1962397	501(c)(3)	91,375				Student Financial Aid
YULA Boys School9760 West Pico Blvd Los Angeles, CA 90035	42-1746735	501(c)(3)	51,380				Student Financial Aid

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
YULA Gırls School1819 South Robertson Blvd LA,CA 90035	20-3081128	501(c)(3)	39,080				Student Financial Aid
Zimmer Children's Museum 6505 Wilshire Blvd Ste 100 LA,CA 90048	20-1470992	501(c)(3)	388,240				Local Agency Support

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DLN: 93493314023994

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

**Compensation Information** 

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388

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

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

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

Note. The sum of columns (B)(1)-(111) 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

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation			
See Additional Data Table							

Schedule J (Form 990) 2012

#### Part III Supplemental Information

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

#### 990 Schedule J, Supplemental Information

ldentifier	Return Reference	Explanation
SUPPLEMENTAL COMPENSATION INFORMATION	SCHEDULE J, PART I, LINE 1A	

Software ID: Software Version:

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Torin 330, Schedule 3, Fart II Officers, Directors, Hustees, Rey Employees, and Highest compensated Employees									
(A) Name	(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form		
r	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ		
JAY SANDERSON (I	(i) 400,000 ii) 0	0	20,870 0	12,500 0	33,700 0	467,070	0		
IVAN WOLKIND (I	(i) 265,000 (ii) 0	0	8,325 0	12,500	16,732 0	302,557	0		
NANCY SACKS (I	(i) 247,696 (ii) 0	0	19,772 0	6,167 0	25,219 0	298,854	0		
ANDREW CUSHNIR (II	(i) 181,683 (ii) 0	0	7,996 0	46,086 0	18,620 0	254,385	0		
I .	(i) 201,223 ii) 0	0	4,385 0	47,609 0	8,591 0	261,808	0		
	(i) 164,559 (ii) 0	0	1,773 0	6,318 0	10,681 0	183,331	0		
John Fishel (I	(i) 219,764 (ii) 0	0	26,999 0	56,394 0	21,548 0	324,705	0		
SUSAN GOTLIB (I	(i) 0 (ii) 0	0	146,867 0	0	0	146,867	0		
MARLA ABRAHAM (I	(i) 162,773 (ii) 0	0	1,010	8,322 0	3,835 0	175,940	0 0		
CYNTHIA AYALA (I	(i) 160,020 (ii) 0	0	8,177 0	37,814 0	1,871 0	207,882	0		
	(I) 159,843 (II) 0	0	1,010	37,814 0	7,527 0	206,194	0 0		

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DLN: 93493314023994

# **Transactions with Interested Persons**

Schedule L (Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Cor		Transaction		on Form 990			janiza		only).		0.1	
Cor	nplete if the org	anızatıon answe	ered "Yes"	on Form 990							0.1	
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1 (4)		Ca person		nin nerween	disqualified	(c) Descrip					d) Corre	ected?
			person	and organiz		(3) 2 65 611 1			400.0011	<u></u> ⊢	res	No
					-							
		incurred by orga	anızatıon m	anagers or d	lisqualified pers	ons during the	year u	nders	ection			
4958 .								.	\$			
<b>3</b> Enter the	amount of tax,	ıf any, on line 2	, above, re	ımbursed by	the organizatio	n		•	<b>-</b> \$			
Part II	oans to and	/or From In	terested	Persons.								
		organization ans				line 38a, or Foi	rm 990	), Part	IV, lın	e 26, o	r ıf the	
		orted an amount										
(a) Name of ( interested	( <b>b)</b> Relationship with	(c) Purpose o	of (d) Los or fron		(e)Original	<b>(f)</b> Balance due	(g) defa		(h		(i)Wr	
person	with organization	loan	organiza		principal amount	aue	ueia	uitr	Appro		agreen	nentr
	J								commi			
			То	From			Yes	No	Yes	No	Yes	No
, I	BOARD	REPAYMENT	Х		3,500,000	3,310,047		Νo	Yes		Yes	
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otal			<u> </u>	<u> </u>		3,310,047					٦	
	rants or Ass	istance Ben	efittina 1	nterester	l Persons	3,310,047						
		organization				rt IV. line 27.						
		(b) Relationship			t of assistance			ance	(e)	Purpos	e of assi	ıstanc
(a) Name of		intérested perso		` ′					` ´	•		
(a) Name of pers			ion	Ì		1						
		organızat	.1011									
		organizat	.1011						-			
		organizat	.1011									

Part IV Business Transactions Complete if the organizati			ne 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon's
				Yes	No
				1	1

#### Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
LOANS TO AND/OR FROM INTERESTED PERSONS		SCHEDULE L, PART II, LINE (1) IN 2011, THE FEDERATION RECEIVED A LOAN OF \$3,500,000 FROM ONE OF ITS BOARD MEMBERS IN ACCORDANCE WITH A CONFIDENTIALITY CLAUSE IN THE AGREEMENT, THE BOARD MEMBER'S NAME IS NOT DISCLOSED, HOWEVER, THE TERMS OF THE LOAN AGREEMENT WERE MORE THAN FAVORABLE TO THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Schedule L (Form 990 or 990-EZ) 2012

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DLN: 93493314023994

**Employer identification number** 

OMB No 1545-0047

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#### **SCHEDULE M** (Form 990)

Department of the Treasury

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**Noncash Contributions** 

Internal Revenue Service Name of the organization JEWISH FEDERATION COUNCIL OF GREATER LA

95-1643388

Pa	Types of Property			·				
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	<b>(d</b> Method of d noncash contrib	etermı		ts
				1 g				
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
	Cars and other vehicles	X	27	44,400	COST / SELLING P	RICE		
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	145	2,062,107	COST / SELLING P	RICE		
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	STATE OF ISRAEL							
25	Other (BONDS)	X	17	139,773	COST / SELLING P	RICE		
	Other ►()			·	•			
	Other ►()							
28	Other►( )							
29	Number of Forms 8283 received	by the orga	inization during the tax yea	r for contributions				
	for which the organization comple	eted Form 8	283, Part IV, Donee Acknowledge	owledgement	29			
							Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	ft acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e thırd part	ies or related organizations	to solicit, process, or sell i	noncash			
	contributions?					32a	Yes	
	If "Yes," describe in Part II							
33	If the organization did not report	t an amount	: in column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II							

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

number of items re-	ceived, or a combination of both.	Also complete this part for any additional information.
Identifier	Return Reference	Explanation
ARRANGEMENT WITH CARS	SCHEDULE M, PART I, QUESTION 32A	THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES USES THE FOR-PROFIT ORGANIZATION, CARS, AS A THIRD PARTY TO ASSIST WITH VEHICLE DONATIONS THE DONOR NOTIFIES THE FEDERATION THAT THEY PLAN TO DONATE A VEHICLE, AND ARRANGEMENTS ARE THEN MADE BETWEEN THE DONOR AND CARS FOR THE PICK UP OF THE VEHICLE CARS WILL TOW THE VEHICLE AND MAKE ALL ARRANGEMENTS NECESSARY FOR THE SALE OF THE VEHICLE ONCE THE VEHICLE HAS BEEN SOLD, CARS WILL PREPARE A LETTER TO THE DONOR THANKING THEM FOR THEIR DONATION TO THE FEDERATION, AND WILL DISCLOSE IN THE LETTER IF THE CAR WAS SOLD FOR LESS THAN OR MORE THAN \$500 CARS IS AWARDED 30% OF THE GROSS SALES PRICE LESS EXPENSES

Schedule M (Form 990) (2012)

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SCHEDULE O

As Filed Data -

DLN: 93493314023994

OMB No 1545-0047

2012

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## Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization JEWISH FEDERATION COUNCIL OF GREATER LA

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

95-1643388

ldentifier	Return Reference	Explanation
AMENDMENTS TO RETURN	FORM 990, ITEM B, CHECKBOX - AMENDED RETURN	AMENDED FORM 990, PART VII, SECTION A AND FORM 990, SCHEDULE J, PART II TO INCLUDE 3 ADDITIONAL HIGHEST COMPENSATED EMPLOYEES WHO WERE INADVERTENTLY LEFT OFF THE ORIGINAL RETURN BRIEFLY DESCRIBE THE ORGANIZATION'S MISSION FORM 990, PART III, LINE 1 BASED ON JEWISH VALUES, THE JEWISH FEDERATION OF GREATER LOS ANGELES CONVENES AND LEADS THE COMMUNITY AND LEVERAGES ITS RESOURCES TO ASSURE THE CONTINUITY OF THE JEWISH PEOPLE, SUPPORT A SECURE STATE OF ISRAEL, CARE FOR JEWS IN NEED HERE AND ABROAD, AND MOBILIZE ON ISSUES OF CONCERN TO THE LOCAL COMMUNITY, ALL WITH OUR LOCAL, NATIONAL, AND INTERNATIONAL PARTNERS PARTNERS

ldentifier	Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS		FORM 990, PART III, LINE 4A - ENSURING THE JEWISH FUTURE FEDERATION CREATES OPPORTUNITIES FOR PEOPLE OF ALL AGES TO PARTICIPATE AND CELEBRATE IN JEWISH LIFE AND CONNECT WITH THE COMMUNITY AND ISRAEL. TO DO SO, WE WORK TO ENSURE THE QUALITY AND REDUCE THE COST OF JEWISH EDUCATIONAL EXPERIENCES, TRAIN LEADERS WHO WILL TEACH JEWISH VALUES TO NEW GENERATIONS, ENGAGE LOCAL SYNAGOGUES, THE LIFEBLOOD OF THE JEWISH COMMUNITY, AND SEND THOUSANDS ON EDUCATIONAL MISSIONS TO ISRAEL, ENSURING THAT STRONG CONNECTIONS WILL PERSIST AS THE HUB OF THE COMMUNITY, THE FEDERATION IS UNIQUELY POSITIONED TO CONNECT JEWS TO ONE ANOTHER AND MAKE JEWISH LIFE ACCESSIBLE AND AFFORDABLE BY LEVERAGING THE STRENGTH OF OUR MEMBERS AND WORKING CLOSELY WITH OUR NETWORK OF TRUSTED PARTNERS FORM 990, PART III, LINES 4B- CARING FOR JEWS IN NEED THE FEDERATION LEVERAGES THE STRENGTH OF ITS COMMUNITY TO PROVIDE AID FOR JEWS IN NEED THE WELL-BEING OF JEWISH SENIORS IS ALSO A CORE PRIORITY, ESPECIALLY WHEN A SENIOR IS A HOLOCAUST SURVIVOR OUR WORK ALSO INCLUDES SEEING TO DAILY NECESSITIES TO THOSE IN NEED, CONNECTING PEOPLE TO THE SKILLS AND SERVICES NECESSARY TO BE SELF-SUFFICIENT, AND ENSURING CHILDREN WITH SPECIAL NEEDS AND OTHERS AT-RISK CASES HAVE THEIR NEEDS MET AND CAN PARTICIPATE IN JEWISH LIFE THE FEDERATION IS ABLE TO CARE FOR OUR OWN COMMUNITY BY WORKING WITH PARTNERS IN LOS ANGELES, ISRAEL, AND OVER 55 COUNTRIES AROUND THE WORLD FORM 990, PART III, LINES 4C - COMMUNITY ENGAGEMENT FOR THE PAST 100 YEARS, THE JEWISH FEDERATION HAS ENGAGED IN OUR CITY, PROMOTING AN INCLUSIVE COMMUNITY THAT REFLECTS THE BEST OF AMERICAN AND JEWISH VALUES THE PURSUIT OF A JUST SOCIETY, ENSURING A STRONG JEWISH FUTURE AND PROMOTING A SAFE AND VIBRANT ISRAEL ARE THE ENDURING CORNERSTONES OF OUR WORK WE BIGAGE THE COMMUNITY BY PROVIDING ROBUST SERVICE AND VOLUNTEER OPPORTUNITIES, COMBATING ILLITERACY, FIGHTING HUNGER, SHAPING POLICY AND ADVOCATING FOR ISRAEL TOGETHER AS A COMMUNITY, AND WITH DIVERSE PARTNERS ACROSS LOS ANGELES, WE CAN SHAPE THE FUTURE OF OUR CITY

ldentifier	Return Reference	Explanation
FAMILY RELATIONSHIPS	· '	LEON JANKS AND SHARON JANKS HAVE A FAMILY RELATIONSHIP, FRANK MAAS AND VIRGINA MAAS HAVE A FAMILY RELATIONSHIP, DEREK BROWN AND LYNETTE BROWN HAVE A FAMILY RELATIONSHIP, AND LES BIDER AND LYNN BIDER HAVE A FAMILY RELATIONSHIP

ldentifier	Return Reference	Explanation
DESCRIPTION OF MEMBERS AND STOCKHOLDERS	VI, SECTION A,	MEMBERS ARE DEFINED AS CONTRIBUTORS WHO HAVE PAID NOT LESS THAN \$100 TO THE ANNUAL COMMUNITY-WIDE FUND RAISING CAMPAIGN WITHIN THE TWELVE MONTHS PRECEDING THE DATE OF A MEMBERS MEETING MEMBERS HAVE THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS

ldentifier	Return Reference	Explanation
MEMBERS OR STOCKHOLDERS WHO MAY ELECT ONE OR MORE MEMBERS OF THE GOV BODY	FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS OF THE FEDERATION CONVENE AT LEAST BIENNIALLY (BIENNIAL MEETING) AND OTHERWISE AS DEEMED NECESSARY BY THE BOARD OF DIRECTORS OR CHAIR ONE HUNDRED MEMBERS CONSTITUTES A QUORUM AT A MEETING OF THE MEMBERS MEMBERS ARE NOT ENTITLED TO VOTE OR ACT BY PROXY ONLY MATTERS OF WHICH NOTICE WAS GIVEN MAY BE ACTED UPON AT A MEMBERS MEETING THE AGENDA OF THE BIENNIAL MEETING SHALL INCLUDE THE ELECTION OF DIRECTORS PURSUANT TO THE BY LAWS MEMBERS SHALL ELECT DIRECTORS FOR A TWO-YEAR TERM AT THE BIENNIAL MEETING PRIOR TO THE BIENNIAL MEETING THE NOMINATIONS COMMITTEE COORDINATES THE SELECTION OF PROPOSED DIRECTORS IN ACCORDANCE WITH THE PROCEDURES ENUMERATED IN THE BY LAWS VACANCIES CREATED BY RESIGNATION, DEATH, INCAPACITY OR OTHER DEPARTURE OF A DIRECTOR MAY BE FILLED BY THE CHAIR'S APPOINTMENT, FOR THE UNEXPIRED PORTION OF THE TERM, SUBJECT TO APPROVAL BY VOTE OF THE BOARD AT THE NEXT BOARD MEETING A REPLACEMENT DIRECTOR MAY SERVE ON THE BOARD BY THE CHAIR'S APPOINTMENT ON AN INTERIM BASIS UNTIL SUCH NEXT BOARD MEETING

Identifier	Return Reference	Explanation
PROCESS TO REVIEW THE FORM 990	FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PREPARED BY THE FEDERATIONS FINANCE STAFF A PUBLIC ACCOUNTING FIRM IS RETAINED TO PROVIDE TAX SERVICES FOR THE FEDERATION WHEN THE FORM 990 IS COMPLETE, BUT BEFORE IT IS FILED, THE AUDIT COMMITTEE MEETS WITH THE CFO AND VP OF FINANCE AND REPRESENTATIVES FROM THE PUBLIC ACCOUNTING FIRM TO PERFORM A THOROUGH REVIEW OF THE FORM 990 THE BOARD HAS EMPOWERED THE AUDIT COMMITTEE TO PERFORM THIS REVIEW OF THE FORM 990 PRIOR TO FILING PRIOR TO FILING THE MEMBERS OF THE BOARD OF DIRECTORS ARE PROVIDED AN ELECTRONIC COPY OF THE FORM 990 FOR REVIEW

Identifier Return Reference	Explanation
CONFLICT OF PART VI, INTEREST SECTION B, LINE 12C	THE JEWISH FEDERATION HAS A WRITTEN CONFLICT OF INTEREST POLICY BOARD MEMBERS, COMMITTEE MEMBERS, OFFICERS, KEY EMPLOYEES AND SELECTED STAFF ARE SUBJECT TO COMPLIANCE WITH THE POLICY THE POLICY IS POSTED ON THE ORGANIZATION'S INTRANET ADDITIONALLY, THE POLICY IS CIRCULATED ON AN ANNUAL BASIS TO AFFECTED PERSONS ALONG WITH A QUESTIONNAIRE TO FURTHER IDENTIFY RELATIONSHIPS THAT REQUIRE DISCLOSURE ON THE FORM 990. THE POLICY DEFINES PROCEDURES FOR THE CONFLICTED PERSON AND/OR OTHERS TO ENSURE THAT BUSINESS TRANSACTIONS ARE IN THE BEST INTEREST OF THE ORGANIZATION, BUSINESS AND FAMILY RELATIONSHIPS ARE FULLY DISCLOSED, AND DISCIPLINARY MEASURES ARE ENFORCED WHEN A POTENTIAL CONFLICT OF INTEREST IS IDENTIFIED BY THE CONFLICTED PARTY OR THE JEWISH FEDERATION, THE NATURE OF THE INTEREST OR INVOLVEMENT IS IMMEDIATELY COMMUNICATED TO THE PRESIDENT, BOARD CHAIR, AND THE RESPECTIVE COMMITTEE CONSIDERING THE TRANSACTION IF THE PARTICULAR TRANSACTION REQUIRES A VOTE, THE CONFLICTED PARTY SHALL NOT BE COUNTED FOR PURPOSES OF A QUORUM NOR SHALL HE OR SHE VOTE ON THE MATTER PERSONS PREPARING AND SIGNING THE FORM 990 ARE FAMILIAR WITH BOARD MEMBERS, COMMITTEE MEMBERS, FINANCIAL TRANSACTIONS (INCLUDING CONTRACTUAL ARRANGEMENTS) AND THE RULES AND POLICIES RELATED TO CONFLICTS OF INTEREST

ldentifier	Return Reference	Explanation
PROCESS FOR DETERMINING EXECUTIVE COMPENSATION	FORM 990, PART VI, SECTION B, LINES 15A AND 15B	THE BY LAWS PROVIDE FOR AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE WHICH REVIEWS AND APPROVES THE COMPENSATION, INCLUDING BENEFITS, OF THE PRESIDENT, CHIEF OPERATING AND FINANCIAL OFFICER, EXECUTIVE VICE PRESIDENT OF FINANCIAL RESOURCE DEVELOPMENT, AND OTHER SELECTED EMPLOYEES WHO COMPRISE THE FIVE HIGHEST PAID EMPLOYEES OF THE FEDERATION THE REVIEW AND APPROVAL PROCESS INCLUDES ENGAGING AN OUTSIDE CONSULTANT WHO USES SALARY SURVEYS AND STUDIES OF NON-PROFIT ORGANIZATIONS TO PROPOSE A COMPENSATION PACKAGE THE REVIEW AND APPROVAL OCCUR UPON HIRING OF THE OFFICER, RENEWAL OR EXTENSION OF THE EMPLOYEE'S EMPLOY MENT AGREEMENT, OR WHEN THE COMPENSATION IS MODIFIED AFTER THE EXECUTIVE COMPENSATION COMMITTEE HAS SETTLED ON A COMPENSATION MATTER, THE RESULTS ARE REPORTED TO THE BOARD IN 2011, THE COMMITTEE ENGAGED AN OUTSIDE CONSULTANT WHO USED SALARY SURVEYS AND STUDIES OF PAY MENTS TO FINANCIAL PROFESSIONALS EMPLOYED BY NON-PROFIT ORGANIZATIONS TO PROPOSE A PACKAGE FOR A NEW EXECUTIVE VICE PRESIDENT OF FINANCIAL RESOURCE DEVELOPMENT THE COMPENSATION AND APPOINTMENT OF THE EXECUTIVE VICE PRESIDENT OF FINANCIAL RESOURCE AND DEVELOPMENT WAS APPROVED BY THE COMMITTEE AND REPORTED TO THE BOARD IN 2011 THE COMPENSATION OF THE CURRENT CHIEF EXECUTIVE OFFICER WAS APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE IN 2009 AND AGAIN IN 2012 AS PART OF THE RENEWAL OF HIS EMPLOY MENT AGREEMENT

ldentifier	Return Reference	Explanation
INSPECTION OF		THE JEWISH FEDERATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION THE JEWISH FEDERATION MAKES ITS CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE ACCESSED FROM THE PUBLIC WEBSITE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R** 

**Related Organizations and Unrelated Partnerships** 

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

OMB No 1545-0047

DLN: 93493314023994

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Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization JEWISH FEDERATION COUNCIL OF GREATER LA		Employer identification number 95-1643388									
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)											
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity						

Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		the organization a	inswered "Yes" to	Form 990, Part IV,	line 34 because it	had oi	ne
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co	<b>g)</b> n 512(b) ontrolled tity?
						Yes	No
See Additional Data Table							_
						1	
						1	
						+	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y		Schedule R (Form	990) 2	012

(a) Name, address, and EIN of related organization		d organization   domicile   controlling   income(related)   (state or   entity   unrelated)   excluded from   country)   tax under		Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	dominant Share of ne(related, total income en related, uded from in under		(g) lare of of-year ssets (h		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh		
					514)			Yes	No		Yes	No			
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	the organi the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domıcıle (state or foreign country)	Legal domicile (state or foreign		Legal domicile state or foreign		(e) Type of entro (C corp, S corp, or trust)		otal Share e of	(g) e of end- year ssets		<b>(h)</b> ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No		

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule											
<b>1</b> D	ring the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes					
b	Gift, grant, or capital contribution to related organization(s)				1b		No				
c	Gift, grant, or capital contribution from related organization(s)				<b>1</b> c	Yes					
d	Loans or loan guarantees to or for related organization(s)				1d		No				
e	Loans or loan guarantees by related organization(s)				1e		No				
f	Dividends from related organization(s)				1f		No				
g	g Sale of assets to related organization(s)										
h	Purchase of assets from related organization(s)				1h		No				
i	i Exchange of assets with related organization(s)										
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No				
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
1	Performance of services or membership or fundraising solicitations for related organization(s)				11		No				
m	m Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes					
0	Sharing of paid employees with related organization(s)				10		No				
р	Reimbursement paid to related organization(s) for expenses				1р		No				
q	Reimbursement paid by related organization(s) for expenses				1q	Yes					
r	O ther transfer of cash or property to related organization(s)				1r		No				
s	Other transfer of cash or property from related organization(s)				1s						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete										
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amo	ount II	nvolved					
ee A	ditional Data Table										

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

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

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													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Software ID: Software Version:

**Return Reference** 

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

**Explanation** 

Schedule R (Form 990) 2012

**Identifier** 

Page **5** 

### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

> Form 990, Schedule R, Part V - Transactions With Related Organizations			
(a) Name of other organization	(b) Transaction type(a-s)	<b>(c)</b> A mount I nvolved	(d) Method of determining amount involved
JEWISH COMMUNITY FOUNDATION OF GREATER LA	A(IV)	340,404	FMV
FLORENCE & BERNARD B ROTH FAMILY FOUNDATION	С	65,000	FMV
JEWISH COMMUNITY FOUNDATION OF GREATER LA	С	2,648,150	FMV
NIZNICK FAMILY FOUNDATION	С	125,000	FMV
THE EDNA & MICKEY WEISS FAMILY FOUNDATION	С	100,000	FMV
THE PEPP FAMILY SUPPORT FOUNDATION	С	53,500	FMV
THE ZIERING FAMILY FOUNDATION	С	105,000	FMV