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Part III

Statement of Program Service Accomplishments

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

☐

1

Briefly describe the organization's mission

THE UNITED JEWISH FOUNDATION OF METROPOLITAN DETROIT OWNS, MANAGES AND INVESTS JEWISH COMMUNAL ASSETS, INCLUDING GENERAL AND ENDOWMENT FUNDS, AGENCY ENDOWMENTS, SUPPORTING FOUNDATIONS AND REAL PROPERTY THE FOUNDATION IS COMMITTED TO ENSURING THAT ASSETS ARE AVAILABLE TO PROMOTE THE CONTINUITY OF THE JEWISH PEOPLE

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 34,496,994 including grants of \$ 34,496,994 ) (Revenue \$ )

DISTRIBUTION OF ASSETS TO THE JEWISH FEDERATION'S ANNUAL CAMPAIGN AND TO OTHER QUALIFIED 501(C)(3) ORGANIZATIONS SERVING THE JEWISH COMMUNITY LOCALLY AND NATIONALLY

4b

(Code ) (Expenses \$ 4,192,782 including grants of \$ ) (Revenue \$ )

OTHER PROGRAM SERVICES

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe in Schedule O )



















(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses 38,689,776

Part IV

Checklist of Required Schedules

	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	3	No
4 <b>Section 501(c)(3) organizations.</b> 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	No
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 I 	6 Yes	
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	No
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 Yes	
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	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b 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	No
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	No
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	No
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	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	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? <i>If "Yes," complete Schedule J</i> . . . . .	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	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)?	Yes	
b	If "Yes," enter the name of the foreign country: CJ, UK, EI, BD See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?		No
7d	If "Yes," indicate the number of Forms 8822 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		No
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
9a	Did the organization make any taxable distributions under section 4966?		No
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		No
10	<b>Section 501(c)(7) organizations.</b> Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	<b>Section 501(c)(12) organizations.</b> Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
13a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	91		
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		
1b	89		
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	Yes
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	No
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	No
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		
a	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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MI
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. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	BECKY STASCH 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI (248) 203-1521

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

**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

[illegible]

## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Sub-Total . . . . .</b>										
<b>c Total from continuation sheets to Part VII, Section A . . . . .</b>										
<b>d Total (add lines 1b and 1c) . . . . .</b>								0	1,191,668	92,922

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WELLINGTON INVESTMENTS 280 CONGRESS ST BOSTON MA 02210	INVESTMENT MANAGEMENT	198,589
GRANTHAM MAYO VANOTTERLOO & CO 40 ROWES WHARF BOSTON MA 02210	INVESTMENT MANAGEMENT	126,848
JEFFREY SLOCUM & CO 43 MAIN STREET SUITE 300 MINNEAPOLIS MN 55414	INVESTMENT CONSULTING	110,833
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶3		

Part VIII

Statement of Revenue

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

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . . 1a				
	b	Membership dues . . . . . 1b				
	c	Fundraising events . . . . . 1c				
	d	Related organizations . . . . . 1d	4,873,458			
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	19,155,862			
	g	Noncash contributions included in lines 1a-1f \$	12,014,163			
	h	Total. Add lines 1a-1f . . . . .	24,029,320			
Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a–2f . . . . .				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	203,535			203,535
	4	Income from investment of tax-exempt bond proceeds . . . . .				
	5	Royalties . . . . .				
	6a	Gross rents				
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss) . . . . .	205,895			205,895
	7a	Gross amount from sales of assets other than inventory				
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss) . . . . .	13,221,374			13,221,374
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . . . . .				
	b	Less direct expenses . . . . .				
	c	Net income or (loss) from fundraising events . . . . .				
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .				
	b	Less direct expenses . . . . .				
	c	Net income or (loss) from gaming activities . . . . .				
	10a	Gross sales of inventory, less returns and allowances . . . . .				
	b	Less cost of goods sold . . . . .				
	c	Net income or (loss) from sales of inventory . . . . .				
		Miscellaneous Revenue	Business Code			
	11a	PARTNERSHIP INCOME	900099	66,840	128,830	-61,990
	b	OTHER OPERATING INCOME	900099	49,463		49,463
	c	PRIOR YEAR GRANT WRITE OFF	900099	44,801		44,801
	d	All other revenue . . . . .		25,020		25,020
	e	Total. Add lines 11a–11d . . . . .		186,124		
	12	Total revenue. See Instructions . . . . .	37,846,248	0	128,830	13,688,098

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	34,496,994	34,496,994		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.				
10	Payroll taxes.				
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	31,161		31,161	
c	Accounting.	38,997		38,997	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion.				
13	Office expenses.	155,427		155,427	
14	Information technology.				
15	Royalties.				
16	Occupancy.	819,562	721,053	98,509	
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	11,091		11,091	
20	Interest.	89,404	89,404		
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	3,721,927	3,704,870	17,057	
23	Insurance.	24,659	170	24,489	
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	JFMD FUND & ADMIN EXP	2,071,647		1,487,873	583,774
b	PROGRAM SERVICES	188,928	188,928		
c	PLEDGE DEBT	-8,375		-8,375	
d	RENTAL EXP ON PT VIII	-511,643	-511,643		
e	All other expenses	13,922		13,922	
25	Total functional expenses. Add lines 1 through 24e.	41,143,701	38,689,776	1,870,151	583,774
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		14,443,183	2	20,870,629
	3	Pledges and grants receivable, net		3,732,551	3	4,215,748
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	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			6	
	7	Notes and loans receivable, net		8,766,677	7	8,680,837
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		2,063,112	9	2,165,557
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a131,593,536			
	b	Less accumulated depreciation	10b61,068,899	72,234,484	10c	70,524,637
	11	Investments—publicly traded securities		138,600,669	11	160,840,041
	12	Investments—other securities See Part IV, line 11		80,403,315	12	86,850,732
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		5,172,346	15	11,240,791
	16	Total assets. Add lines 1 through 15 (must equal line 34)		325,416,337	16	365,388,972
Liabilities	17	Accounts payable and accrued expenses		374,270	17	369,438
	18	Grants payable		1,688,035	18	3,259,668
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		1,735,984	20	1,614,349
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		1,755,555	23	550,000
	24	Unsecured notes and loans payable to unrelated third parties			24	
	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		16,555,621	25	19,310,593
	26	Total liabilities. Add lines 17 through 25		22,109,465	26	25,104,048
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		126,887,390	27	146,184,299
	28	Temporarily restricted net assets		29,762,943	28	36,701,843
	29	Permanently restricted net assets		146,656,539	29	157,398,782
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		303,306,872	33	340,284,924
	34	Total liabilities and net assets/fund balances		325,416,337	34	365,388,972

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	37,846,248
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	41,143,701
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	-3,297,453
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	303,306,872
5	Net unrealized gains (losses) on investments . . . . .	5	21,271,919
6	Donated services and use of facilities . . . . .	6	3,900,000
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	15,103,586
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	340,284,924

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?		No
3b	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		

Additional Data

Software ID:

Software Version:

EIN: 38-1360585

Name: UNITED JEWISH FOUNDATION

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK ADLER DIRECTOR	50 0 00	X						0	0	0
PETER M ALTER DIRECTOR	50 0 00	X						0	0	0
EUGENE M APPLEBAUM DIRECTOR	50 0 00	X						0	0	0
PAMELA APPLEBAUM VICE-PRESIDENT	50 0 00	X		X				0	0	0
RONALD M APPLEBAUM DIRECTOR	50 0 00	X						0	0	0
JAMES BELLINSON DIRECTOR	50 1 00	X						0	0	0
MICHAEL E BERGER TREASURER	50 0 00	X		X				0	0	0
MANDELL L BERMAN DIRECTOR	50 0 00	X						0	0	0
DENNIS S BERNARD DIRECTOR	50 0 00	X						0	0	0
DOUGLAS A BLOOM DIRECTOR	50 10 50	X						0	0	0
PENNY B BLUMENSTEIN DIRECTOR	50 1 00	X						0	0	0
RICHARD BRODER DIRECTOR	50 0 00	X						0	0	0
AVERN L COHN DIRECTOR	50 0 00	X						0	0	0
ROBERT S COLBURN DIRECTOR	50 0 00	X						0	0	0
SANDRA MUSKOVITZ DANTO DIRECTOR	50 0 00	X						0	0	0
SCOTT A EISENBERG DIRECTOR	50 0 00	X						0	0	0
DOUGLAS ETKIN DIRECTOR	50 0 00	X						0	0	0
KATHLEEN WILSON FINK DIRECTOR	50 0 00	X						0	0	0
PHILLIP WM FISHER VICE-PRESIDENT	50 0 00	X		X				0	0	0
ELYSE ESSICK FOLTYN VICE-PRESIDENT	50 50	X		X				0	0	0
MINDI FYNKE DIRECTOR	50 0 00	X						0	0	0
CONRAD L GILES DIRECTOR	50 0 00	X						0	0	0
LYNDA GILES DIRECTOR	50 0 00	X						0	0	0
GAYLE GOLD DIRECTOR	50 0 00	X						0	0	0
DIANE GOLDSTEIN DIRECTOR	50 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NANCY GROSFELD DIRECTOR	50 1 00	X						0	0	0
CHERYL GUYER DIRECTOR	50 0 00	X						0	0	0
MARGOT HALPERIN DIRECTOR	50 0 00	X						0	0	0
MARK R HAUSER DIRECTOR	50 50	X						0	0	0
ROBERT HEINRICH DIRECTOR	50 0 00	X						0	0	0
DOREEN HERMELIN DIRECTOR	50 0 00	X						0	0	0
MICHAEL HOROWITZ DIRECTOR	50 0 00	X						0	0	0
LEE HURWITZ DIRECTOR	50 0 00	X						0	0	0
LAWRENCE S JACKIER DIRECTOR	50 0 00	X						0	0	0
ALAN J KAUFMAN VICE-PRESIDENT	50 0 00	X		X				0	0	0
SCOTT KAUFMAN CEO AND SECRETARY	20 00 20 00	X		X				0	271,356	11,759
BERNARD KENT DIRECTOR	50 0 00	X						0	0	0
SHERRI KETAI DIRECTOR	50 0 00	X						0	0	0
JASON KLEIN DIRECTOR	50 0 00	X						0	0	0
MARK KOWAKSKY DIRECTOR	50 0 00	X						0	0	0
MATTHEW B LESTER DIRECTOR	50 1 00	X						0	0	0
ROBB LIPPITT DIRECTOR	50 0 00	X						0	0	0
LISA I LIS DIRECTOR	50 1 00	X						0	0	0
BEVERLY LISS DIRECTOR	50 1 00	X						0	0	0
RABBI HAROLD LOSS DIRECTOR	50 0 00	X						0	0	0
MICHAEL W MADDIN DIRECTOR	50 1 00	X						0	0	0
FLORINE MARK DIRECTOR	50 0 00	X						0	0	0
EDWARD MEER DIRECTOR	50 0 00	X						0	0	0
JEREMY J MODELL DIRECTOR	50 0 00	X						0	0	0
HOWARD MOROF DIRECTOR	50 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ALLAN NACHMAN DIRECTOR	50 0 00	X						0	0	0
ROBERT H NAFTALY DIRECTOR	50 1 00	X						0	0	0
LARRY M NEMER DIRECTOR	50 0 00	X						0	0	0
TERRY NOSAN DIRECTOR	50 0 00	X						0	0	0
JOSHUA F OPPERER DIRECTOR	50 1 00	X						0	0	0
GRAHAM A ORLEY DIRECTOR	50 0 00	X						0	0	0
MARCIE ORLEY DIRECTOR	50 0 00	X						0	0	0
DAVID K PAGE DIRECTOR	50 1 00	X						0	0	0
NORMAN A PAPPAS DIRECTOR	50 0 00	X						0	0	0
MICHAEL B PERLMAN DIRECTOR	50 0 00	X						0	0	0
JACK A ROBINSON DIRECTOR	50 0 00	X						0	0	0
BENJAMIN F ROSENTHAL VICE-PRESIDENT	50 0 00	X		X				0	0	0
TERRI FARBER ROTH DIRECTOR	50 0 00	X						0	0	0
TODD SACHSE PRESIDENT	10 00 0 00	X		X				0	0	0
STEVEN F SCHLAFER DIRECTOR	50 0 00	X						0	0	0
JEFFREY SCHLUSSEL DIRECTOR	50 0 00	X						0	0	0
MARK E SCHLUSSEL DIRECTOR	50 1 00	X						0	0	0
KAREN SOSNICK SCHOENBERG DIRECTOR	50 1 00	X						0	0	0
ALAN E SCHWARTZ DIRECTOR	50 0 00	X						0	0	0
ALAN S SCHWARTZ DIRECTOR	50 0 00	X						0	0	0
ROBERT SLATKIN DIRECTOR	50 0 00	X						0	0	0
RONALD SOLLISH DIRECTOR	50 0 00	X						0	0	0
JEFFREY P STRAUS DIRECTOR	50 0 00	X						0	0	0
JOEL D TAUBER DIRECTOR	50 0 00	X						0	0	0
CAROLYN TISDALE DIRECTOR	50 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GARY TORGOW DIRECTOR	50 0 00	X						0	0	0
STEVEN WEISBERG DIRECTOR	50 0 00	X						0	0	0
LAWRENCE A WOLFE DIRECTOR	50 0 00	X						0	0	0
ALAN S ZEKELMAN VICE-PRESIDENT	50 0 00	X		X				0	0	0
NANCY ADLER DIRECTOR	50 0 00	X						0	0	0
NORMAN BEITNER DIRECTOR	50 0 00	X						0	0	0
ROSELYN BLANCK DIRECTOR	50 0 00	X						0	0	0
STEPHEN EISENBERG DIRECTOR	50 0 00	X						0	0	0
JEFFREY EISENSHTADT DIRECTOR	50 0 00	X						0	0	0
ROBERT GORDON DIRECTOR	50 0 00	X						0	0	0
ROBERT KLEIMAN DIRECTOR	50 0 00	X						0	0	0
LAWRENCE LAX DIRECTOR	50 1 00	X						0	0	0
MARTY MADDIN DIRECTOR	50 0 00	X						0	0	0
GARY SHIFFMAN DIRECTOR	50 0 00	X						0	0	0
BRIAN SIEGEL DIRECTOR	50 0 00	X						0	0	0
NEAL ZALENKO DIRECTOR	50 0 00	X						0	0	0
DOROTHY BENYAS CHIEF FINANCIAL OFFICER	20 00 20 00			X				0	189,734	18,749
ANDREW ECHT CHIEF FINANCIAL RESOURCE DEVELOPMENT OFFICER	20 00 20 00			X				0	207,541	15,020
HOWARD NEISTEIN CHIEF ADMINISTRATIVE OFFICER	20 00 20 00			X				0	190,498	19,124
ROBERT ARONSON SEN DEV DIR/FORMER CEO	17 00 18 00						X	0	332,539	28,270

SCHEDULE A  
(Form 990 or 990EZ)

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization UNITED JEWISH FOUNDATION	Employer identification number 38-1360585
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☒

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☒

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☒

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		No
11g(ii)		No
11g(iii)		No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) JEWISH FEDERATION OF METROPOLITAN DETROIT	381359214	7	Yes		Yes		Yes		17,829,925
Total									17,829,925

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 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 this box and stop here . . . . . ▶						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2011 Schedule A, Part II, line 14		15				
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 supported organization						▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						▶

Part IIISupport 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 in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
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 furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6 )						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b 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 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.)						
14 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 this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—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 ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Explanation

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
UNITED JEWISH FOUNDATION

Employer identification number  
38-1360585

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	553	1076
2 Aggregate contributions to (during year)	15,759,697	6,123,042
3 Aggregate grants from (during year)	13,342,743	11,527,770
4 Aggregate value at end of year	65,509,078	187,043,943
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)  
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	149,404,380	157,624,913	148,096,045	138,620,141
b	Contributions	4,734,990	1,893,420	1,550,734	1,882,929
c	Net investment earnings, gains, and losses	24,842,532	-1,569,460	18,638,756	16,215,850
d	Grants or scholarships	8,425,878	8,544,493	9,910,621	8,622,875
e	Other expenditures for facilities and programs				
f	Administrative expenses				864,514
g	End of year balance	170,556,024	149,404,380	158,374,914	148,096,045

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

87 000 %

c

Temporarily restricted endowment

13 000 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	3,669,000	7,175,208		10,844,208
b Buildings		117,639,004	58,790,062	58,848,942
c Leasehold improvements				
d Equipment		2,738,333	2,278,837	459,496
e Other		371,991		371,991
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				70,524,637

Schedule D (Form 990) 2012



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	89,259,480
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	21,271,919
b	Donated services and use of facilities . . . . .	2b	3,900,000
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	25,729,670
e	Add lines 2a through 2d . . . . .	2e	50,901,589
3	Subtract line 2e from line 1 . . . . .	3	38,357,891
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII ) . . . . .	4b	-511,643
c	Add lines 4a and 4b . . . . .	4c	-511,643
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . .	5	37,846,248

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	48,631,252
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	9,559,198
e	Add lines 2a through 2d . . . . .	2e	9,559,198
3	Subtract line 2e from line 1 . . . . .	3	39,072,054
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII ) . . . . .	4b	2,071,647
c	Add lines 4a and 4b . . . . .	4c	2,071,647
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . .	5	41,143,701

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
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ALL ENDOWMENT FUNDS ARE USED TO SUPPORT THE MISSION OF THE ORGANIZATION
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE ORGANIZATIONS ARE MICHIGAN NONPROFIT CORPORATIONS UNDER SECTION 509(A)(3) OF THE INTERNAL REVENUE CODE THAT HAS BEEN GRANTED AN EXEMPTION FROM THE PAYMENT OF INCOME TAXES UNDER SECTION 501(C)(3) AND HAS BEEN DETERMINED TO BE OTHER THAN PRIVATE FOUNDATIONS. THE ORGANIZATION'S MANAGEMENT BELIEVES THAT THE ORGANIZATIONS CONTINUE TO OPERATE IN A MANNER THAT PRESERVES ITS TAX EXEMPT STATUS. THE ORGANIZATIONS APPLY THE STANDARDS FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS, ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE ORGANIZATIONS RECOGNIZE THE FINANCIAL STATEMENT BENEFIT OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVANT TAX AUTHORITY WOULD BE MORE LIKELY THAN NOT SUSTAIN THE POSITION FOLLOWING AN AUDIT. FOR TAX POSITIONS MEETING THE MORE LIKELY THAN NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED, UPON ULTIMATE SETTLEMENT WITH THE RELEVANT TAX AUTHORITY. BASED ON ITS EVALUATION, THE ORGANIZATIONS HAVE CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION IN ITS FINANCIAL STATEMENTS. THE ORGANIZATIONS ARE NO LONGER SUBJECT TO U.S. FEDERAL INCOME TAX EXAMINATIONS BY THE INTERNAL REVENUE SERVICE FOR YEARS PRIOR TO THE 2009 TAX YEAR (FISCAL YEAR ENDED MAY 31, 2010).
PART XI, LINE 2D - OTHER ADJUSTMENTS		SUPPORT FOUNDATION REVENUE 18,754,027 CHARITABLE REMAINDER TRUST REVENUE 443,935 INTERORGANIZATION APPROPRIATIONS 6,531,708
PART XI, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSE -511,643
PART XII, LINE 2D - OTHER ADJUSTMENTS		SUPPORT FOUNDATION EXPENSES 9,047,555 RENTAL EXPENSE 511,643
PART XII, LINE 4B - OTHER ADJUSTMENTS		JFMD FUNDRAISING/ADMIN EXP 2,071,647

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

2012

Open to Public  
Inspection

Name of the organization  
UNITED JEWISH FOUNDATION

Employer identification number  
38-1360585

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(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	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		56,888,427
EUROPE	0	0	INVESTMENTS		12,314,908
MIDDLE EAST AND NORTH AFRICA	0	0	INVESTMENTS		315,227
3a Sub-total	0	0			69,518,562
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			69,518,562

**Part II**

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶
- 3 Enter total number of other organizations or entities . . . . . ▶

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

[illegible]

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☒ Yes ☐ 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).*

☐ Yes ☒ No

**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).

[illegible]

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
UNITED JEWISH FOUNDATION

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

Open to Public  
Inspection

Employer identification number  
38-1360585

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No

2

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

169

3

Enter total number of other organizations listed in the line 1 table . . . . .

**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)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)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
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 TO MONITOR OUR CONSTITUENT AGENCIES, WE RECEIVE ANNUAL BUDGET PROPOSALS AND PERIODIC PROGRAM AND BUDGET REPORTS

Software ID:

Software Version:

EIN: 38-1360585

Name: UNITED JEWISH FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADAT SHALOM SYNAGOGUE29901 MIDDLEBELT FARMINGTON HILLS,MI 48334	38-1437934	501(C)(3)	171,733				TO SUPPORT CONSERVATIVE JUDAISM
AKIVA HEBREW DAY SCHOOL21100 W TWELVE MILE RD SOUTHFIELD,MI 48076	38-1750780	501(C)(3)	30,524				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALZHEIMER'S ASSOCIATION20300 CIVIC CENTER DRIVE 100 SOUTHFIELD,MI 48076	38-2919674	501(C)(3)	42,540				TO SUPPORT MEDICAL RESEARCH
AM COMM FOR THE WEIZMANN INSTIT OF SCIENCEPO BOX 19002 NEWYORK,NY 102770672	13-1623886	501(C)(3)	521,581				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CIVIL LIBERTIES UNION FOUNDATION2966 WOODWARD AVE DETROIT,MI 48201	23-7243421	501(C)(3)	5,750				TO ADVANCE CIVIL LIBERTIES AND CIVIL RIGHTS
AMERICAN FRIENDS OF THE HEBREW UNIVERSITY INCONE BATTERY PARK PLAZA NEW YORK,NY 100041405	13-1568923	501(C)(3)	13,250				TO SUPPORT JEWISH EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ISRAEL EDUCATION FNDN INC120 W MADISON STE 500 CHICAGO,IL 60602	52-1623781	501(C)(3)	475,000				TO SUPPORT JEWISH EDUCATION
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC711 3RD AVE NEW YORK,NY 10017	13-1656634	501(C)(3)	250,250				TO SUPPORT THE INTERNATIONAL JEWISH COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN SOCIETY FOR TECHNION30230 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	13-0434195	501(C)(3)	101,000				TO SUPPORT HIGHER EDUCATION
ANTI-DEFAMATION LEAGUE25800 NORTHWESTERN HWY SOUTHFIELD, MI 48075	13-1818723	501(C)(3)	32,125				TO FIGHT DISCRIMINATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AVENTURA TURNBERRY JEWISH CENTER20400 NE 30TH AVE AVENTURA,FL 33180	59-1673246	501(C)(3)	25,800				TO SUPPORT THE COMMUNITY
BEAR HUG FOUNDATION PO BOX 2197 BIRMINGHAM,MI 48012	38-3501554	501(C)(3)	18,500				TO SUPPORT CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEAUMONT FOUNDATION PO BOX 5802 TROY,MI 480079620	38-2707084	501(C)(3)	55,500				TO SUPPORT MEDICAL RESEARCH
BIRMINGHAM PUBLIC SCHOOL CHARITABLE FOUNDATION550 MERRILL STREET BIRMINGHAM,MI 48009	38-3214599	501(C)(3)	6,000				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRTHRIGHT ISRAEL FOUNDATION33 EAST 33RD STREET NEW YORK,NY 10016	13-4092050	501(C)(3)	38,800				TO SUPPORT FOUNDATION
B'NAI BRITH YOUTH ORGANIZATION6600 WEST MAPLE RD WEST BLOOMFIELD,MI 48322	31-1794932	501(C)(3)	31,577				TO SUPPORT THE ANNUAL CAMPAIGN

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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BRAVO COLORADO AT VAIL-BEAVER CREEKPO BOX 2270 VAIL,CO 81658	84-1074065	501(C)(3)	30,000				TO SUPPORT THE ARTS
CHALLENGED ATHLETES INCPO BOX 910769 SAN DIEGO,CA 92191	33-0739596	501(C)(3)	20,000				TO SUPPORT SPORTSMANSHIP

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CHAMBER MUSIC SOCIETY OF DETROIT31731 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334	38-2794258	501(C)(3)	14,600				TO SUPPORT THE ARTS
CHILDREN'S HOSPITAL OF MICHIGAN FNDN3911 BEAUBIEN DETROIT,MI 48201	32-0087353	501(C)(3)	104,100				TO SUPPORT HEALTH CARE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CHILDREN'S TUMOR FOUNDATION95 PINE STREET NEW YORK,NY 10005	13-2298956	501(C)(3)	53,000				TO SUPPORT MEDICAL RESEARCH
CLEVELAND CLINIC FOUNDATION9500 EUCLID AVE CLEVELAND,OH 441931655	34-0714585	501(C)(3)	75,000				TO SUPPORT HEALTH CARE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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COLLABORATION FOR EARLY CHILDHOOD CARE & EDUCPO BOX 4105 OAK PARK,IL 60603	30-0132292	501(C)(3)	15,000				TO SUPPORT EDUCATION
COMMUNITY FOUNDATION FOR SE MICHIGAN333 W FORT ST DETROIT,MI 48226	38-2530980	501(C)(3)	25,000				TO SUPPORT THE COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CONGREGATION BETH AHM5075 W MAPLE RD WEST BLOOMFIELD, MI 48322	38-6004801	501(C)(3)	14,054				TO SUPPORT CONSERVATIVE JUDAISM
CONGREGATION BETH SHALOM14601 W LINCOLN RD OAK PARK,MI 48237	38-1572145	501(C)(3)	15,602				TO SUPPORT CONSERVATIVE JUDAISM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CONGREGATION SHAAREY ZEDEK27375 BELL RD SOUTHFIELD,MI 48034	38-1420140	501(C)(3)	63,485				TO SUPPORT CONSERVATIVE JUDAISM
CONGREGATION SHIR TIKVAH3900 NORTHFIELD PKWY TROY,MI 48084	38-2439322	501(C)(3)	18,082				TO SUPPORT CONSERVATIVE JUDAISM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CORNERSTONE SCHOOLS ASSOCIATION6861 E NEVADA DETROIT,MI 48234	38-2995984	501(C)(3)	55,000				TO SUPPORT EDUCATION
CRANBROOK EDUCATIONAL COMMUNITYPO BOX 801 BLOOMFIELD HILLS,MI 483030801	38-2015048	501(C)(3)	127,450				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CROHN'S & COLITIS FNDN OF AMERICA31313 NORTHWESTERN HWY SUITE 204 FARMINGTON HILLS,MI 48334	13-6193105	501(C)(3)	24,000				TO SUPPORT MEDICAL RESEARCH AND EDUCATION
DETROIT HISTORICAL SOCIETY5401 WOODWARD DETROIT,MI 48302	38-1381144	501(C)(3)	7,550				TO SUPPORT THE ARTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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DETROIT INSTITUTE OF ARTS5200 WOODWARD AVE DETROIT,MI 48202	38-1359510	501(C)(3)	113,511				TO SUPPORT THE ARTS
DETROIT SYMPHONY ORCHESTRA ADMINISTRATIVE OFFICE DETROIT,MI 48201	38-1385132	501(C)(3)	85,100				TO SUPPORT THE ARTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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DETROIT ZOOLOGICAL SOCIETY8450 W 10 MILE ROAD ROYAL OAK,MI 48067	38-6027356	501(C)(3)	10,800				TO SUPPORT THE ZOO
EPISCOPAL COMMUNITY SERVICE OF SAN FRANCISCO165 EIGHTH STREET SAN FRANCISCO ,CA 94103	95-1945256	501(C)(3)	80,000				TO HELP THE NEEDY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FACING HISTORY & OURSELVES NATIONAL FOUNDATION14 EAST 4TH STREET NEW YORK,NY 10012	04-2761636	501(C)(3)	10,000				TO SUPPORT THE ARTS
FOCUS HOPE1355 OAKMAN BLVD DETROIT,MI 48238	38-1948285	501(C)(3)	100,000				TO SUPPORT THE COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FOOD LIFELINE1702 NE 150TH ST SEATTLE,WA 98155	91-1090450	501(C)(3)	50,000				TO FEED THE HUNGRY
FRANKEL JEWISH ACADEMY OF METRO DETROIT6600 WEST MAPLE RD WEST BLOOMFIELD,MI 48322	38-3428219	501(C)(3)	311,424				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FRED HUTCHINSON CANCER RESEARCH CENTER1100 FAIRVIEW AVE N J5-200 SEATTLE,WA 98109	91-1540426	501(C)(3)	16,500				TO SUPPORT MEDICAL RESEARCH
FRESH AIR SOCIETY6735 TELEGRAPH RD BLOOMFIELD HILLS,MI 48301	38-1360545	501(C)(3)	347,354				TO SUPPORT THE NEEDS OF CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FRIENDS OF THE ISRAEL DEFENSE FORCES8451 BOULDER CT WALLED LAKE, MI 48390	13-3156445	501(C)(3)	55,260				TO SUPPORT ISRAEL DEFENSE FORCES
FRIENDSHIP CIRCLE6892 W MAPLE RD WEST BLOOMFIELD, MI 48322	38-3613944	501(C)(3)	11,900				TO SUPPORT FAMILIES WITH SPECIAL NEEDS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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GLEANERS COMMUNITY FOOD BANK2131 BEAUFAIT DETROIT,MI 48207	38-2156255	501(C)(3)	5,750				TO SUPPORT THE COMMUNITY
HADASSAH-GTR DETROIT CHAPTER5030 ORCHARD LAKE RD W BLOOMFIELD,MI 483232752	38-1396062	501(C)(3)	10,750				TO SUPPORT WOMEN'S CAUSES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HEBREW FREE LOAN6735 TELEGRAPH RD BLOOMFIELD HILLS,MI 48301	38-1359260	501(C)(3)	260,058				TO PROVIDE INTEREST FREE LOANS
HENRY FORD HEALTH SYSTEMONE FORD PLACE DETROIT,MI 482023450	38-1357020	501(C)(3)	115,125				TO SUPPORT HEALTH CARE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HILLEL DAY SCHOOL32200 MIDDLEBELT ROAD FARMINGTON HILLS,MI 48334	38-1586703	501(C)(3)	159,373				TO SUPPORT EDUCATION
HILLEL OF METRO DETROIT667 GROSBERG CENTER DETROIT,MI 48202	52-1758804	501(C)(3)	17,275				TO SUPPORT EDUCATION

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HOLOCAUST MEMORIAL CENTER28123 ORCHARD LAKE RD FARMINGTON HILLS, MI 483343738	38-2402635	501(C)(3)	45,220				TO PRESERVE THE PAST AND PROTECT THE FUTURE
INSTITUTE FOR DAYANIM 25625 SOUTHFIELD ROAD SOUTHFIELD,MI 48075	20-0899773	501(C)(3)	8,640				TO SUPPORT EDUCATION

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ISAAC AGREE DOWNTOWN SYNAGOGUE1457 GRISWOLD DETROIT,MI 48226	38-2937738	501(C)(3)	15,407				TO SUPPORT REFORM JUDAISM
ISRAEL STRATEGIC ALTERNATIVE ENERGY FOUNDATION121 STEUART STREET SAN FRANCISCO ,CA 94105	80-0263559	501(C)(3)	200,000				TO SUPPORT ENERGY RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JARC30301 NORTHWESTERN HWY SUITE 100 FARMINGTON HILLS, MI 48334	38-3690103	501(C)(3)	252,938				TO SUPPORT DISABLED INDIVIDUALS
JCRC OF SAN FRANCISCO MARIN & PENINSULA121 STEUART ST SAN FRANCISCO, CA 94105	94-1156335	501(C)(3)	110,000				TO SUPPORT THE JEWISH COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JEWISH COMMUNITY CENTER6600 WEST MAPLE ROAD WEST BLOOMFIELD, MI 48322	38-1358397	501(C)(3)	2,935,900				TO SUPPORT THE JEWISH COMMUNITY
JEWISH COMMUNITY FEDERATION OF SAN FRANCISCO 3200 CALIFORNIA SAN FRANCISCO ,CA 94118	94-3227260	501(C)(3)	20,000				TO SUPPORT THE JEWISH COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JEWISH COMMUNITY RELATIONS COUNCIL6735 TELEGRAPH RD BLOOMFIELD HILLS, MI 48301	38-3011194	501(C)(3)	9,244				TO SUPPORT PUBLIC AFFAIRS IN THE COMMUNITY
JEWISH FAMILY & CHILDREN'S SERVICES 2150 POST STREET SAN FRANCISCO ,CA 94115	94-1156528	501(C)(3)	200,000				TO SUPPORT THE JEWISH COMMUNITY

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JEWISH FAMILY SERVICE 6555 WEST MAPLE RD WEST BLOOMFIELD, MI 48322	38-0691329	501(C)(3)	638,987				TO SUPPORT JEWISH FAMILIES
JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES6505 WILSHIRE BLVD LOS ANGELES,CA 90048	95-1643388	501(C)(3)	6,000				TO SUPPORT THE JEWISH COMMUNITY

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JEWISH FEDERATION OF METRO DETROIT6735 TELEGRAPH BLOOMFIELD HILLS, MI 48303	38-1359214	501(C)(3)	17,829,925				TO SUPPORT THE JEWISH COMMUNITY
JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY9901 DONNA KLEIN BLVD BOCA RATON, FL 334281788	59-1945109	501(C)(3)	29,325				TO SUPPORT THE COMMUNITY

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JEWISH HOSPICE & CHAPLAINCY NETWORK 6555 W MAPLE RD WEST BLOOMFIELD, MI 48322	38-3429268	501(C)(3)	92,700				TO SUPPORT THE ELDERLY
JEWISH NATIONAL FUND PO BOX 5609 HICKSVILLE, NY 11802	13-1659627	501(C)(3)	38,477				TO SUPPORT ISRAEL

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JEWISH SENIOR LIFE OF METRO DETROIT15000 WEST TEN MILE ROAD OAK PARK,MI 48237	38-2693397	501(C)(3)	1,552,166				TO SUPPORT THE ELDERLY
JEWISH THEOLOGICAL SEMINARY6735 TELEGRAPH RD STE 310 BLOOMFIELD HILLS,MI 483013143	13-0887640	501(C)(3)	55,512				TO SUPPORT EDUCATION

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JUVENILE DIABETES RESEARCH FOUNDATION 24359 NORTHWESTERN HWY SUITE 225 SOUTHFIELD,MI 48075	23-1907729	501(C)(3)	45,300				TO SUPPORT MEDICAL RESEARCH
JVS29699 SOUTHFIELD RD SOUTHFIELD,MI 48076	38-1358013	501(C)(3)	509,744				TO AID JOB RESEARCH

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KADIMA15999 W 12 MILE RD SOUTHFIELD,MI 48076	38-2630596	501(C)(3)	92,301				TO SUPPORT INDIVIDUALS WITH SPECIAL NEEDS
KARMANOS CANCER INSTITUTE4100 JOHN R DETROIT,MI 48201	38-1613280	501(C)(3)	275,750				TO SUPPORT MEDICAL RESEARCH

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KOLLEL INSTITUTE OF GTR DETROIT15230 WEST LINCOLN RD OAK PARK,MI 48237	38-2114751	501(C)(3)	10,602				TO SUPPORT JEWISH EDUCATION
LIGHTBRIDGE HOSPICE COMMUNITY FOUNDATION 5280 CARROLL CANYON SAN DIEGO,CA 92121	20-1931420	501(C)(3)	12,000				TO SUPPORT END OF LIFE CARE

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LUBAVITCH FOUNDATION 14100 W 9 MILE RD OAK PARK,MI 48237	38-2346125	501(C)(3)	26,165				TO SUPPORT ORTHODOX JUDAISM
MAKE-A-WISH FOUNDATION OF MICHIGAN28697 APPLE BLOSSOM LANE FARMINGTON HILLS,MI 48331	38-2505812	501(C)(3)	12,000				TO PROVIDE SUPPORT TO THE TERMINALLY ILL

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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MATAN B'SETER15699 JEANETTE OAK PARK,MI 48237	11-3405224	501(C)(3)	55,000				TO SUPPORT JEWISH EDUCATION
MERCER ISLAND SCHOOLS FOUNDATIONPO BOX 1243 MERCER ISLAND,WA 98040	91-1143444	501(C)(3)	5,500				TO SUPPORT EDUCATION

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MESIVTA OF TOLEDO4200 WALNUT LAKE ROAD WEST BLOOMFIELD, MI 48323	20-4751245	501(C)(3)	26,000				TO SUPPORT THE COMMUNITY
MICHIGAN OPERA THEATRE1526 BROADWAY DETROIT, MI 48226	38-2052726	501(C)(3)	41,000				TO SUPPORT THE ARTS

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MICHIGAN STATE UNIVERSITYA217 EAST FEE HALL EAST LANSING,MI 48224	38-6005984	501(C)(3)	22,750				TO SUPPORT EDUCATION
MICHIGAN STATE UNIVERSITY - HILLEL FOUNDATION360 CHARLES STREET EAST LANSING,MI 48824	38-3034766	501(C)(3)	85,780				TO SUPPORT EDUCATION

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MULTIPLE MYELOMA RESEARCH FOUNDATION 383 MAIN AVE NORWALK,CT 06851	06-1504413	501(C)(3)	1,001,450				TO SUPPORT MEDICAL RESEARCH
MUSEUM OF CONTEMPORARY ART DETROIT4454 WOODWARD AVE DETROIT,MI 48201	20-3872376	501(C)(3)	20,500				TO SUPPORT THE ARTS

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NATURE CONSERVANCY WASHINGTON STATE CHAPTER4245 NORTH FAIRFAX DR SUITE 100 ARLINGTON,VA 22203	90-0248331	501(C)(3)	40,000				TO SUPPORT THE ENVIRONMENT
OAKLAND UNIVERSITY 2200 N SQUIRREL RD ROCHESTER, MI 483094401	38-6078765	501(C)(3)	19,750				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORCHARDS CHILDREN'S SERVICE30215 SOUTHFIELD RD SOUTHFIELD,MI 48076	38-2712084	501(C)(3)	9,610				TO SUPPORT CHILDREN
ORT AMERICA6735 TELEGRAPH RD BLOOMFIELD HILLS,MI 48301	13-5562424	501(C)(3)	55,300				TO SUPPORT JOB EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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PATH CATALYST FUND 1455 NW LEARY WAY SEATTLE,WA 98107	91-1157127	501(C)(3)	10,000				TO SUPPORT HEALTH CARE
SAN FRANCISCO FRIENDS OF THE URBAN FORESTS PRESIDIO OF SANFRANCISCO BLGD PO BOX 29456 SAN FRANCISCO ,CA 94129	94-2699528	501(C)(3)	10,000				TO SUPPORT THE ENVIRONMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SAN FRANCISCO HILLEL33 BANBURY DR SAN FRANCISCO ,CA 94132	94-3152892	501(C)(3)	35,000				TO SUPPORT THE JEWISH COMMUNITY
SARASOTA MANATEE JEWISH FEDERATION580 S MCINTOSH RD SARASOTA,FL 342321959	59-1227747	501(C)(3)	7,000				TO SUPPORT THE JEWISH COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SOCIAL VENTURE PARTNERS1601 2ND AVE SEATTLE,WA 981011539	91-1894424	501(C)(3)	6,000				TO SUPPORT THE COMMUNITY
STAND FOR CHILDREN LEADERSHIP CENTER3240 EASTLAKE AVE SEATTLE,WA 98102	52-1957214	501(C)(3)	7,500				TO SUPPORT CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE BETH EL7400 TELEGRAPH RD BLOOMFIELD HILLS,MI 48301	38-1359595	501(C)(3)	55,245				TO SUPPORT REFORM JUDAISM
TEMPLE EMANU-EL14450 WTEN MILE OAK PARK,MI 48237	38-1493800	501(C)(3)	6,247				TO SUPPORT REFORM JUDAISM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE ISRAEL5725 WALNUT LAKE RD WEST BLOOMFIELD, MI 48323	38-1490194	501(C)(3)	267,483				TO SUPPORT REFORM JUDAISM
TEMPLE SHIR SHALOM 3999 WALNUT LAKE RD WEST BLOOMFIELD, MI 48323	38-2803191	501(C)(3)	29,950				TO SUPPORT REFORM JUDAISM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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THE ART OF ELYSIUM3278 WILSHIRE BLVD - PENTHOUSE LOS ANGELES,CA 90010	95-4673306	501(C)(3)	6,250				TO SUPPORT THE ARTS
THE JEWISH ENSEMBLE THEATRE6600 WEST MAPLE ROAD WEST BLOOMFIELD,MI 48322	38-2861818	501(C)(3)	54,550				TO SUPPORT THE ARTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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THE UCLA FOUNDATION 405 HILGARD AVE LOS ANGELS,CA 90024	95-2250801	501(C)(3)	35,000				TO SUPPORT EDUCATION
TIPPING POINT COMMUNITY220 MONTGOMERY STREET SAN FRANCISCO,CA 94107	20-2121739	501(C)(3)	100,000				TO SUPPORT THE COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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US HOLOCAUST MEMORIAL MUSEUM100 RAOUL WALLENBERGER PL WASHINGTON,DC 20024	52-1309391	501(C)(3)	7,500				TO SUPPORT THE ARTS
UNITED WAY OF SOUTHEASTERN MICHIGAN1212 GRISWOLD ST DETROIT,MI 482269925	20-3099071	501(C)(3)	14,250				TO SUPPORT THE ANNUAL CAMPAIGN

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIV OF MICHIGAN - HILLEL1429 HILL ST ANN ARBOR, MI 481043105	38-6119964	501(C)(3)	199,170				TO SUPPORT JEWISH EDUCATION
UNIVERSITY OF MICHIGAN-3003 S STATE ST ANN ARBOR, MI 481091288	38-6006309	501(C)(3)	180,404				TO SUPPORT EDUCATION

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VAIL VALLEY FOUNDATIONPO BOX 309 VAIL,CO 81658	74-2215035	501(C)(3)	36,750				TO SUPPORT THE COMMUNITY
WALSH COLLEGE3838 LIVERNOIS RD TROY,MI 480079810	38-6090208	501(C)(3)	70,034				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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WAYNE STATE UNIVERSITY DEVELOPMENT OFFICE DETROIT,MI 48202	38-6028429	501(C)(3)	34,900				TO SUPPORT EDUCATION
YAD EZRA2850 WELEVEN MILE RD BERKLEY,MI 480723039	38-2904733	501(C)(3)	52,378				TO FEED THE HUNGRY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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YESHIVA BETH YEHUDAH 15751 W LINCOLN SOUTHFIELD, MI 48076	38-1437939	501(C)(3)	346,103				TO SUPPORT JEWISH EDUCATION
YESHIVA GEDOLAH RABBINICAL COLLEGE 24600 GREENFIELD RD OAK PARK, MI 48237	38-2569760	501(C)(3)	13,000				TO SUPPORT JEWISH EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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YESHIVAS DARCHEI TORAH21550 W 12 MILE ROAD SOUTHFIELD,MI 48076	38-2842622	501(C)(3)	6,568				TO SUPPORT CONSERVATIVE JUDAISM
AMERICAN FRIENDS OF ALYN HOSPITAL51 E 42ND ST SUITE 308 NEWYORK,NY 10277	13-6100833	501(C)(3)	18,000				TO SUPPORT MEDICAL SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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AMERICAN FRIENDS OF BAR-ILAN UNIVERSITY 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	13-6192275	501(C)(3)	27,750				TO SUPPORT JEWISH EDUCATION
AMERICAN FRIENDS OF ORR SHALOM 25 W 45TH ST NEW YORK, NY 10036	13-3502817	501(C)(3)	10,000				TO SUPPORT ISRAELI SOCIAL SERVICE ORGANIZATIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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AMERICAN JEWISH COMMITTEE1156 15TH STREET NW SUITE 1201 WASHINGTON,DC 20005	13-5563393	501(C)(3)	65,825				TO SUPPORT THE INTERNATIONAL JEWISH COMMUNITY
AMERICAN RED MAGEN DAVID FOR ISRAEL23215 COMMERCE PARK ROAD SUITE 306 BEACHWOOD,OH 44122	23-7231942	501(C)(3)	13,150				TO PROVIDE MEDICAL SERVICES

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BAIS CHABAD OF WEST BLOOMFIELD5595 W MAPLE RD WEST BLOOMFIELD, MI 48322	38-2388299	501(C)(3)	7,100				TO SUPPORT JUDAISM
BANNER ALZHEIMERS FOUNDATION2025 N 3RD STREET SUITE 250 PHOENIX,AZ 85004	20-4862361	501(C)(3)	25,000				TO SUPPORT MEDICAL RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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BIG CITY MOUNTAINEERS INC710 10TH STREET GOLDEN,CO 80401	65-0200163	501(C)(3)	6,000				TO SUPPORT YOUTH SERVICES
CENTRAL PARK CONSERVANCY INC14 E 60TH ST 8TH FL NEWYORK,NY 10022	13-3022855	501(C)(3)	7,500				TO SUPPORT, MANAGE, AND RESTORE CENTRAL PARK

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CLAL440 PARK AVENUE S 4TH FLOOR NEW YORK,NY 10016	23-7390358	501(C)(3)	18,000				TO SUPPORT JEWISH LEARNING
CONGREGATION AHAVAS OLAM15010 SUTHERLAND OAK PARK,MI 48237	20-3302399	501(C)(3)	75,000				TO SUPPORT CONSERVATIVE JUDAISM

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CONGREGATION EMANU-EL2 LAKE ST SAN FRANCISCO,CA 94118	94-1156521	501(C)(3)	10,000				TO SUPPORT CONSERVATIVE JUDAISM
DETROIT JEWISH NEWS FOUNDATION INC29200 NORTHWESTERN HWY STE 110 SOUTHFIELD,MI 48034	27-4383848	501(C)(3)	5,990				TO SUPPORT THE COMMUNITY

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DETROIT PUBLIC TELEVISION1 CLOVER COURT WIXOM,MI 48393	38-1440200	501(C)(3)	8,200				TO SUPPORT THE ARTS
ELEM YOUTH IN DISTRESS INC270 MADISON AVE SUITE 1501 NEWYORK,NY 10016	13-3171815	501(C)(3)	15,000				TO SUPPORT YOUTH SERVICES

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FLINT JEWISH FEDERATION619 WALLENBERG ST FLINT,MI 48502	38-1359257	501(C)(3)	24,265				TO SUPPORT THE JEWISH COMMUNITY
FORGOTTEN HARVEST21800 GREENFIELD OAKL PARK,MI 48237	38-2926476	501(C)(3)	11,000				TO FEED THE HUNGRY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FIRENDS OF YEMIN ORDE 12230 WILKINS AVENUE ROCKVILLE,MD 20852	22-3090463	501(C)(3)	100,000				TO SUPPORT YOUTH SERVICES
GREAT LAKES CHAMBER MUSIC FESTIVAL20300 CIVIC CENTER SUITE 100 SOUTHFIELD,MI 48076	20-1106153	501(C)(3)	8,779				TO SUPPORT THE ARTS

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GREATER LANSING JEWISH WELFARE FEDERATIONPO BOX 975 EAST LANSING,MI 48826	38-2106869	501(C)(3)	8,550				TO SUPPORT THE JEWISH COMMUNITY
HOSPICE OF MICHIGAN INC400 MACK AVE DETROIT,MI 48201	38-2255529	501(C)(3)	10,750				TO SUPPORT END OF LIFE CARE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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INSTITUTE FOR THE ANALYSIS OF GLOBAL SECURITY7811 MONTROSE RD STE 505 POTOMAC,MD 20854	22-3880419	501(C)(3)	20,000				TO SUPPORT ENERGY RESEARCH
INVESTIGATIVE PROJECT ON TERRORISM FOUNDATION5505 CONNECTICUT AVE NW STE 341 WASHINGTON,DC 20015	13-4331855	501(C)(3)	20,000				TO SUPPORT PUBLIC EDUCATION ON INTERNATIONAL THREATS

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ISRAEL 21C15233 VENTURA BLVD SUITE 1108 SHERMAN OAKS,CA 91403	77-0571579	501(C)(3)	25,000				TO SUPPORT EDUCATION ON INSRAEL
ISRAEL EMERGENCY ALLIANCEPO BOX 341069 LOS ANGELES,CA 90034	01-0566033	501(C)(3)	13,750				TO SUPPORT ISRAEL

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JEWISH FEDERATION OF GRAND RAPIDS4127 EMBASSY DR SE GRAND RAPIDS,MI 49546	38-6099686	501(C)(3)	16,000				TO SUPPORT THE JEWISH COMMUNITY
JEWISH FEDERATION OF GREATER ATLANTA1440 SPRING ST ATLANTA,GA 30309	58-1021791	501(C)(3)	23,000				TO SUPPORT THE JEWISH COMMUNITY

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JEWISH FEDERATION OF KALAMAZOO & SOUTHWEST MI7124 HICKORY POINT DR PORTAGE,MI 49024	38-6095960	501(C)(3)	12,700				TO SUPPORT THE JEWISH COMMUNITY
JEWISH HISTORICAL SOCIETY6600 W MAPLE RD W BLOOMFIELD,MI 48322	38-6056397	501(C)(3)	13,400				TO SUPPORT SEWISH HISTORY

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JEWISH HOME AND SENIOR LIVING FOUNDATION302 SILVER AVE SAN FRANCISCO,CA 94112	02-0724278	501(C)(3)	90,000				TO SUPPORT THE ELDERLY
JEWISH RESOURCE CENTER CHABAD OF ASPEN435 WEST MAIN STREET ASPEN,CO 81611	22-3787221	501(C)(3)	6,000				TO SUPPORT THE JEWISH COMMUNITY

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KIDS KICKING CANCER645 GRISWOLD ST SUITE 444 DETROIT,MI 48226	38-3500655	501(C)(3)	5,050				TO SUPPORT MEDICAL RESEARCH
LIGHTHOUSE OF OAKLAND COUNTY INCPO BOX 430508 PONTIAC,MI 48342	38-2391381	501(C)(3)	9,500				TO PROVIDE CRISIS SUPPORT AND RESOURCES

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MPTF CORPPO BOX 51150 LOS ANGELES,CA 90051	95-4597683	501(C)(3)	30,000				TO SUPPORT PROGRAMS FOR MOTION PICTURE RETIREES
NCSY16947 W 10 MILE RD SOUTHFIELD,MI 48075	13-5623717	501(C)(3)	6,250				TO SUPPORT JEWISH YOUTH

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NEW YORK UNIVERSITY SCHOOL OF MEDICINE550 1ST AVE RM SCI-47 NEW YORK,NY 10016	23-7268635	501(C)(3)	10,000				TO SUPPORT EDUCATION
PEF ISRAEL ENDOWMEND FUNDPO BOX 9991 SAN JOSE,CA 95157	13-6104086	501(C)(3)	5,250				TO SUPPORT JEWISH PROGRAMS

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PENINIM OF AMERICA315 SQUANKUM ROAD LAKEWOOD,NJ 08701	20-1260977	501(C)(3)	5,500				TO SUPPORT JEWISH PROGRAMS
RECONTRUCTION CONGREGATION OF DETROIT1409 NICOLET PLACE DETROIT,MI 48207	23-1710675	501(C)(3)	10,051				TO SUPPORT JUDAISM

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SAN FRANCISCO FORTY NINERS FOUNDATION4949 CENTENNIAL BLVD SANTA CLARA,CA 95054	77-0287514	501(C)(3)	10,000				TO SUPPORT SAN FRANCISICO CHARITIES
TEMPLE BETH ISRAEL5725 WALNUT LAKE RD WEST BLOOMFIELD,MI 48323	38-1490194	501(C)(3)	6,545				TO SUPPORT REFORM JUDAISM

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TEMPLE BETH SHALOM 3999 WALNUT LAKE RD WEST BLOOMFIELD, MI 48323	38-2803191	501(C)(3)	16,956				TO SUPPORT REFORM JUDAISM
TEMPLE B'NAI ISRAEL PETOSKY08752 MULBERRY LANE CHARLEVOIX, MI 49720	38-6071719	501(C)(3)	15,000				TO SUPPORT REFORM JUDAISM

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TEMPLE ISRAEL OF LONG BEACH3538 E 3RD STREET LONG BEACH,CA 90814	95-1684093	501(C)(3)	100,000				TO SUPPORT REFORM JUDAISM
THE MISSOULA COMMUNITY SCHOOLPO BOX 9272 MISSOULA,MT 59807	81-0541487	501(C)(3)	10,000				TO SUPPORT EDUCATION

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TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK33 WEST 60TH STREET 7TH FLOOR NEW YORK,NY 10023	13-5598093	501(C)(3)	45,000				TO SUPPORT EDUCATION
UNIVERSITY MUSICAL SOCIETY881 N UNIVERSITY AVE ANN ARBOR,MI 49024	38-1545881	501(C)(3)	16,000				TO SUPPORT THE ARTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MIAMIPO BOX 248106 CORAL GABLES,FL 33124	59-0624458	501(C)(3)	10,000				TO SUPPORT EDUCATION
UNIVERSITY OF NORTH CAROLINA CHAPEL HILL ARTS & SCIENCES FOUNDATION134 E FRANKLIN ST CHAPEL HILL,NC 27514	56-1150509	501(C)(3)	25,000				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PENNSYLVANIA215 S 39TH ST PHILEDELPHIA,PA 19104	23-1355000	501(C)(3)	13,750				TO SUPPORT EDUCATION
UNIVERSITY OF SOUTHERN CALIFORNIA SCHOOL OF DRAMATIC ARTS UNIVERSITY PARK LOS ANGELES,CA 90089	95-1642394	501(C)(3)	25,000				TO SUPPORT EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARIETY- THE CHILDREN'S CHARITYCRANBROOK CENTRE 600 S ADAMS BIRMINGHAM,MI 48009	38-2140506	501(C)(3)	45,000				TO SUPPORT THE COMMUNITY
WINTHROP ROCKEFELLER FOUNDATION4301 W MARKHAM STREET 816 LITTLE ROCK,AR 72205	71-0285871	501(C)(3)	500,000				TO SUPPORT ECONOMIC DEVELOPMENT AND EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YATOOMA'S FOUNDATION FOR THE KIDS1900 S TELEGRAPH RD BLOOMFIELD HILLS, MI 48302	38-3514998	501(C)(3)	7,500				TO PROVIDE CRISIS SUPPORT AND RESOURCES
YOUNG ISRAEL OF SOUTHFIELD27705 LAHSER SOUTHFIELD,MI 48034	38-2267079	501(C)(3)	10,322				TO SUPPORT ORTHODOX JUDAISM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH FOUNDATIONPO BOX 309 VAIL,CO 81658	84-1442909	501(C)(3)	10,500				TO SUPPORT EDUCATION

Schedule J (Form 990)  <div>Department of the Treasury Internal Revenue Service</div>	Compensation Information  For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  ▶ <b>Complete if the organization answered "Yes" to Form 990, Part IV, question 23.</b>  ▶ <b>Attach to Form 990. ▶ See separate instructions.</b>	OMB No 1545-0047
		2012
		Open to Public Inspection
Name of the organization UNITED JEWISH FOUNDATION		Employer identification number  38-1360585

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
1b	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			
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?			
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			
	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study		
	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> 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			
4a	Receive a severance payment or change-of-control payment?			No
4b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	Yes		
4c	Participate in, or receive payment from, an equity-based compensation arrangement?			No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	<b>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</b>			
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			
5a	The organization?			No
5b	Any related organization?			No
	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			
6a	The organization?			No
6b	Any related organization?			No
	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			No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			

**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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)SCOTT KAUFMAN CEO AND SECRETARY	(i)	0	0	0	0	0	0	0
	(ii)	264,622	0	6,734	0	11,759	283,115	0
(2)DOROTHY BENYAS CHIEF FINANCIAL OFFICER	(i)	0	0	0	0	0	0	0
	(ii)	188,856	0	878	0	18,749	208,483	0
(3)ANDREW ECHT CHIEF FINANCIAL RESOURCE DEVELOPMENT	(i)	0	0	0	0	0	0	0
	(ii)	207,127	0	414	0	15,020	222,561	0
(4)HOWARD NEISTEIN CHIEF ADMINISTRATIVE OFFICER	(i)	0	0	0	0	0	0	0
	(ii)	188,856	0	1,642	0	19,124	209,622	0
(5)ROBERT ARONSON SEN DEV DIR/FORMER CEO	(i)	0	0	0	0	0	0	0
	(ii)	277,554	0	54,985	0	28,270	360,809	0

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.

Identifier	Return Reference	Explanation
	PART I, LINE 4B	ROBERT ARONSON - \$44,795 ROBERT PARTICIPATES IN A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN UNDER THIS ARRANGEMENT, THE ORGANIZATION MAKES AN ANNUAL CONTRIBUTION TO THE ACCOUNT AND PAYS ANNUAL INTEREST ON THE AVERAGE BALANCE OF THE PRECEDING 12 MONTHS. ROBERT IS REQUIRED TO TAKE A DISTRIBUTION EACH YEAR IN AGREEMENT WITH THE CONTRACT.

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
UNITED JEWISH FOUNDATION

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number  
38-1360585

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MICHIGAN STRATEGIC FUND	52-1417332		08-10-2007	2,146,887	SEE PART V		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	2,146,887							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	2,146,887							
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III

Private Business Use

					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?					X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?					X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	%		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	%		%		%		%	
6	Total of lines 4 and 5	%		%		%		%	
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?	X							
c	No rebate due?		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI

Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Identifier	Return Reference	Explanation
SCHEDULE K, PART 1, LINE A, COLUMN F	DESCRIPTION OF PURPOSE	TO FINANCE THE ACQUISITION AND INSTALLATION OF VARIOUS ENERGY SAVING IMPROVEMENTS INCLUDING HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS, TEMPERATURE CONTROL SYSTEMS, BUILDING ENVELOPE AND INSULATION SYSTEMS, LIGHTING SYSTEMS AND VARIOUS PLUMBING DEVICES TO BE LOCATED AT THE JEWISH COMMUNITY CENTER JPM FACILITY IN THE CITY OF OAK PARK

Schedule L  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Transactions with Interested Persons

▶ 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

2012

Open to Public Inspection

Name of the organization UNITED JEWISH FOUNDATION	Employer identification number  38-1360585
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			Yes	No		Yes	No
Total ▶ \$											

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ETKIN EQUITIES	DOUGLAS ETKIN, BOARD MEMBER, IS THE OWNER OF ETKIN EQUITIES	127,492	ETKIN EQUITIES IS THE PROPERTY MANAGER OF THE APPLEBAUM CAMPUS		No

**Part V Supplemental Information**  
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M  
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization  
UNITED JEWISH FOUNDATION

Employer identification number  
38-1360585

Part I

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 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	312	10,142,738	FAIR MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .	X	1	125,000	FAIR MARKET VALUE
16 Real estate—Commercial . . . . .	X	1	1,550,000	FAIR MARKET VALUE
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► (LEASEHOLD IMPROVEMENTS) . . . . .	X	1	196,425	FAIR MARKET VALUE
26 Other ► ( ) . . . . .				
27 Other ► ( ) . . . . .				
28 Other ► ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

No

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

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.

Identifier	Return Reference	Explanation
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SCHEDULE O  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

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.

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
UNITED JEWISH FOUNDATION

Employer identification number  
38-1360585

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	THE FOLLOWING BOARD MEMBERS HAVE FAMILY RELATIONSHIPS PETER ALTER AND DOUG ETKIN EUGENE APPLEBAUM AND PAMELA APPLEBAUM NORA BARRON AND MARC BARRON JAMES BELLINSON AND CAROLYN BELLINSON PHILLIP FISHER AND JANE SHERMAN MINDI FYNKE AND MATT LESTER CONRAD GILES AND LYNDA GILES CAROLYN GREENBERG AND HUGH GREENBERG CHERYL GUYER AND DAN GUYER JEROME HALPERIN AND MARGOT HALPERIN NANCY HEINRICH AND ROBERT HEINRICH ROBERT HEINRICH AND BRIAN SIEGEL CINDY HUGHEY AND FAYLENE OWEN BRIAN KEPES AND FERN KEPES DIANE KLEIN AND EMERY KLEIN DIANE KLEIN AND BARBARA ZALTZ EMERY KLEIN AND BARBARA ZALTZ ANESSA KRAMER AND DAVID KRAMER SHARON LIPTON AND MICHAEL PERLMAN JEFFREY LASDAY AND LORI LASDAY HANNAN LIS AND LISA LIS ARTHUR LISS AND BEVERLY LISS MARTY MADDIN AND MICHAEL MADDIN FLORINE MARK AND LISA LIS AMY NEISTEIN AND HOWARD NEISTEIN PATTI NEMER AND LARRY NEMER PATTI NEMER AND ELLEN MAISELOFF HOWARD ROSEN AND MARTIN MADDIN BENJAMIN ROSENTHAL AND MARTA ROSENTHAL BRIAN SATOVSKY AND NEIL SATOVSKY JENNIFER SILVERMAN AND PAUL SILVERMAN RONALD SOLLISH AND ELIZABETH SOLLISH CAROLYN TISDALE AND LAURENCE TISDALE STEVEN WEISBERG AND STEVEN SCHLAFER THE FOLLOWING BOARD MEMBERS HAVE BUSINESS RELATIONSHIPS EUGENE APPLEBAUM AND PAMELA APPLEBAUM RICHARD BRODER AND TODD SACHSE LEE HURWITZ AND TODD SACHSE JEFFREY LASDAY AND LORI LASDAY JANE SHERMAN AND JESSICA SHERMAN ROBERT SLATKIN AND MICHAEL MADDIN ROBERT SLATKIN AND MARK HAUSER ROBERT SLATKIN AND ALAN KAUFMAN CAROLYN TISDALE AND LAURENCE TISDALE DEBORAH TYNER AND MINDI FYNKE RICHARD BRODER AND LEE HURWITZ RICHARD BRODER AND RON CHARFOOS RICHARD BRODER AND NEAL ZALENKO MARK HAUSER AND MICHAEL MADDIN ANESSA KRAMER AND DAVID KRAMER MARTY MADDIN AND MICHAEL MADDIN MICHAEL MADDIN AND MARK HAUSER NEIL SATOVSKY AND BRIAN SATOVSKY
	FORM 990, PART VI, SECTION A, LINE 3	THE ORGANIZATION DELEGATED MANAGEMENT DUTIES TO THE JEWISH FEDERATION OF METROPOLITAN DETROIT
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE HAS THE AUTHORITY TO APPROVE THE FORM 990 ON BEHALF OF THE BOARD OF DIRECTORS THE FORM 990 IS REVIEWED INTERNALLY BY THE FINANCE DIRECTOR AND CHIEF FINANCIAL OFFICER THE PUBLIC DISCLOSURE COPY IS THEN REVIEWED AND APPROVED BY THE AUDIT COMMITTEE FOLLOWING AUDIT COMMITTEE APPROVAL, THE FORM 990 IS FILED THE BOARD OF UNITED JEWISH FOUNDATION RECEIVE THE PUBLIC DISCLOSURE COPY OF THE FORM 990 AFTER IT IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, BOARD MEMBERS OF UNITED JEWISH FOUNDATION DISCLOSE IN WRITING ANY POTENTIAL CONFLICTS OF INTEREST THIS DOCUMENTATION IS MAINTAINED ON FILE AT THE TIME OF VOTING ON GRANT APPROVALS, BOARD MEMBERS ARE ASKED TO CITE CONFLICTS OF INTEREST, IF ANY EXIST, AND ABSTAIN FROM INDIVIDUAL VOTES THIS PROCESS IS REPORTED IN THE BOARD MEETING MINUTES
	FORM 990, PART VI, SECTION B, LINE 15	A COMPENSATION COMMITTEE DETERMINES COMPENSATION BASED ON ESTABLISHED GOALS AND OBJECTIVES THE COMMITTEE WILL ALSO CONSIDER COMPARABLE SALARY DATA FROM OTHER JEWISH FEDERATIONS OR NON-PROFIT ORGANIZATIONS THIS PROCESS IS DONE ANNUALLY FOR THE CEO, CFO, CHIEF FINANCIAL RESOURCE DEVELOPMENT OFFICER AND THE CHIEF ADMINISTRATIVE OFFICER AND LAST OCCURRED IN MAY 2013 THE ANALYSIS AND CONCLUSIONS ARE DOCUMENTED IN THE COMMITTEE MEETING MINUTES
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	ALLOCATION OF JFMD FUNDRAISING & ADMINISTRATIVE EXPENSES TO UJF 2,071,647 INTERORGANIZATION APPROPRIATIONS 6,531,708 NET INTERFUND TRANSFERS NOT INCLUDED ON RETURN 6,500,231
	FORM 990, PART XII, LINE 2C	UNITED JEWISH FOUNDATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTING FIRM THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

2012

Open to Public Inspection

Name of the organization  
UNITED JEWISH FOUNDATION

Employer identification number  
38-1360585

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
See Additional Data Table							

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

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

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
See Additional Data Table									

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

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)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

Yes

1k

No

1l

No

1m

No

1n

Yes

1o

Yes

1p

Yes

1q

Yes

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

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.

[illegible]

Software ID:

Software Version:

EIN: 38-1360585

Name: UNITED JEWISH FOUNDATION

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation							
Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
BEATRICE KATZ CHARITABLE REMAINDER TRUST #9  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 26-6823191	CHARITABLE REMAINDER TRUST	MI	N/A	T		24,073	88 000 %		No
BEATRICE KATZ CHARITABLE REMAINDER TRUST  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 20-6160826	CHARITABLE REMAINDER TRUST	MI	N/A	T		15,857	84 600 %		No
BEATRICE KATZ CHARITABLE REMAINDER TRUST #4  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 20-7077496	CHARITABLE REMAINDER TRUST	MI	N/A	T		12,777	83 500 %		No
BEATRICE KATZ CHARITABLE REMAINDER TRUST #6  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 20-7441367	CHARITABLE REMAINDER TRUST	MI	N/A	T		11,434	83 300 %		No
BEATRICE KATZ CHARITABLE REMAINDER TRUST #7  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 20-7441331	CHARITABLE REMAINDER TRUST	MI	N/A	T		11,434	83 300 %		No
BEATRICE KATZ CHARITABLE REMAINDER TRUST #8  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 20-6307513	CHARITABLE REMAINDER TRUST	MI	N/A	T		12,330	79 800 %		No
BEATRICE KATZ CHARITABLE REMAINDER TRUST #5  6735 TELEGRAPH PO BOX 2030 BLOOMFIELD HILLS, MI 48303 20-7190446	CHARITABLE REMAINDER TRUST	MI	N/A	T		11,452	79 300 %		No
ALBERT DUBIN CHARITABLE ANNUITY TRUST UA 081794  4665 BOCAIRE BLVD BOCA RATON, FL 33487 38-3193200	CHARITABLE REMAINDER TRUST	FL	N/A	T		896,625	57 200 %		No