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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2012Open to Public
Inspection**A** For the 2012 calendar year, or tax year beginning **08/01/12**, and ending **07/31/13****B** -Check if applicable☒ Address change☐ Name change☐ Initial return☐ Terminated☐ Amended return☐ Application pending**C** Name of organization**DALLAS JEWISH COMMUNITY FOUNDATION**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

12700 HILLCREST ROAD

Room/suite

201

City, town or post office, state, and ZIP code

DALLAS**TX 75230****D** Employer identification number**75-2836123****E** Telephone number**214-615-9351****G** Gross receipts \$ **20,787,975****F** Name and address of principal officer**MEYER BODOFF****12700 HILLCREST ROAD, SUITE 201****DALLAS****TX 75230****H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status☒ 501(c)(3)☐ 501(c) ()

(insert no)

☐ 4947(a)(1) or☐ 527**J** Website ▶ **WWW.DJCF.ORG****K** Form of organization☒ Corporation☐ Trust☐ Association☐ Other ▶**L** Year of formation **1999****M** State of legal domicile **TX****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE O		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	43
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	43
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	9
	6 Total number of volunteers (estimate if necessary)	6	100
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	9,108,733	16,820,136
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,567,161	3,775,528
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	187,577	192,311
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,863,471	20,787,975
	14 Benefits paid to or for members (Part IX, column (A), line 4)	7,551,939	8,705,110
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	871,995	889,474
	b Total fundraising expenses (Part IX, column (D), line 25)		0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	564,442	583,616
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	8,988,376	10,178,200
	19 Revenue less expenses Subtract line 18 from line 12	3,875,095	10,609,775
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	143,609,385	162,779,429
	22 Net assets or fund balances Subtract line 21 from line 20	67,928,382	73,618,614
		75,681,003	89,160,815

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

MEYER BODOFF

Type or print name and title

Date

6/13/14**Paid****Preparer Use Only**

Print/Type preparer's name

ELLAN WRIGHT

Preparer's signature

Ellan Wright

Date

6/11/14Check ☐ if PTINself-employed **P00112450**

Firm's name

COLE & REED, P.C.

Firm's EIN

73-1312422

Firm's address

531 COUCH DR

Phone no

OKLAHOMA CITY, OK 73102-2251
405-239-7961

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

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2012)

621

4

SCANNED JUL 08 2014

Part III Statement of Program Service Accomplishments

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

☒ **X****1** Briefly describe the organization's mission**SEE SCHEDULE O****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 ☒ **X** 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 ☒ **X** 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 \$ **9,606,996** including grants of \$ **8,705,110**) (Revenue \$)
DISTRIBUTIONS AND GRANTS TO OTHER NON-PROFIT AGENCIES AT THE APPROVAL OF THE OFFICERS OF THE BOARD OF TRUSTEES.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

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 ► **9,606,996**

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
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		X
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		X
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		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
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		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
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		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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?		
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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
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)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
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?		X
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 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
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	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. 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	Section 501(c)(12) organizations. 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	Section 4947(a)(1) non-exempt charitable trusts. 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	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
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?		X
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 line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI ☒

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. 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.	43	
1b Enter the number of voting members included in line 1a, above, who are independent.	43	
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?	X	
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
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?		X
7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
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.		X

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?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
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.	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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.	X	
b Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
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?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
- 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 ► **MEYER BODOFF**

12700 HILLCREST ROAD, SUITE 201**DALLAS****TX 75230****214-615-9351**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(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			
(1) CARY ROSSEL	1.00									
CHAIRMAN	0.00	X		X				0	0	0
(2) ALAN KLEIN	1.00									
VICE CHAIRMAN	0.00	X		X				0	0	0
(3) DONALD SCHAFFER	1.00									
TRUSTEE	0.00	X						0	0	0
(4) MARSHALL FUNK	1.00									
TRUSTEE	0.00	X						0	0	0
(5) JUDITH BARTON	1.00									
TRUSTEE	0.00	X						0	0	0
(6) J. TODD CHANON	1.00									
TRUSTEE	0.00	X						0	0	0
(7) HOWARD S. COHEN	1.00									
TRUSTEE	0.00	X						0	0	0
(8) RUSTY COOPER	1.00									
VICE CHAIRMAN	0.00	X		X				0	0	0
(9) RICHARD L. GLAZER	1.00									
TRUSTEE	0.00	X						0	0	0
(10) BARBARA GUTOW	1.00									
TRUSTEE	0.00	X						0	0	0
(11) MARCY C. HELFAND	1.00									
TRUSTEE	0.00	X						0	0	0

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

(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			
(12) JULIE LOWENBERG	1.00									
TRUSTEE	0.00	X						0	0	0
(13) HYLTON JONAS	1.00									
TRUSTEE	0.00	X						0	0	0
(14) DONALD KIVOWITZ	1.00									
TRUSTEE	0.00	X						0	0	0
(15) LEONARD R. KRASNOW	1.00									
TRUSTEE	0.00	X						0	0	0
(16) ANN E. LEVINE	1.00									
TRUSTEE	0.00	X						0	0	0
(17) LISA R. NEWMAN	1.00									
TRUSTEE	0.00	X						0	0	0
(18) HARLAN POLLOCK	1.00									
TRUSTEE	0.00	X						0	0	0
(19) STUART M. PRESCOTT	1.00									
TRUSTEE	0.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A								297,604		
d Total (add lines 1b and 1c)								297,604		

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
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? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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

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

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

(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			
(12) STANLEY RABIN	1.00									
TRUSTEE	0.00	X						0	0	0
(13) JOHN A. RAPHAEL	1.00									
TRUSTEE	0.00	X						0	0	0
(14) RICHARD ROHAN	1.00									
TRUSTEE	0.00	X						0	0	0
(15) ANDREW H. SCHULTZ	1.00									
TRUSTEE	0.00	X						0	0	0
(16) LAWRENCE E. STEINBERG	1.00									
TRUSTEE	0.00	X						0	0	0
(17) RONALD G. STEINHART	1.00									
TRUSTEE	0.00	X						0	0	0
(18) ALAN TOLMAS	1.00									
TRUSTEE	0.00	X						0	0	0
(19) MICHELLE TYCHER-STEIN	1.00									
TRUSTEE	0.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

- 3** Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		
4		
5		

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

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

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

(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			
(12)MILES D. ZITMORE	1.00									
TRUSTEE	0.00	X						0	0	0
(13)GERARDO WEINSTEIN	1.00									
TRUSTEE	0.00	X						0	0	0
(14)MARK H. KREDITOR	1.00									
TRUSTEE	0.00	X						0	0	0
(15)DAVID RADUNSKY	1.00									
TRUSTEE	0.00	X						0	0	0
(16)LAWRENCE ROSENBLOOM	1.00									
TRUSTEE	0.00	X						0	0	0
(17)LARRY SCHOENBRUN	1.00									
TRUSTEE	0.00	X						0	0	0
(18)GARY HOFFMAN	1.00									
TRUSTEE	0.00	X						0	0	0
(19)STANFORD KAUFMAN	1.00									
TRUSTEE	0.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
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? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

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

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

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

(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			
(12) RON MANKOFF	1.00									
TRUSTEE	0.00	X						0	0	0
(13) RICHARD MASSMAN	1.00									
TRUSTEE	0.00	X						0	0	0
(14) BERT ROMBERG	1.00									
TRUSTEE	0.00	X						0	0	0
(15) HOWARD SCHULTZ	1.00									
TRUSTEE	0.00	X						0	0	0
(16) MYRON SCHWITZER	1.00									
TRUSTEE	0.00	X						0	0	0
(17) IRA SILVERMAN	1.00									
TRUSTEE	0.00	X						0	0	0
(18) ANDREA STATMAN	1.00									
TRUSTEE	0.00	X						0	0	0
(19) PEGGY TOBOLOWSKY	1.00									
TRUSTEE	0.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
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? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

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

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

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

(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			
(12) MEYER L. BODOFF	40.00									
PRESIDENT/CEO	0.00			X				194,583	0	0
(13) JERRY BLAIR	40.00									
SR. DIR. OF FINANCE	0.00					X		103,021	0	0
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total								297,604		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
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? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	16,820,136		
	g	Noncash contributions included in lines 1a-1f		\$ 4,636,990		
h Total. Add lines 1a-1f			16,820,136			
Program Service Revenue and Other Similar Amounts			Busn Code			
	2a					
	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)		1,669,280		1,669,280
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents	(i) Real	(ii) Personal		
	b	Less rental exps				
	c	Rental inc or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b	Less cost or other basis & sales exps				
	c	Gain or (loss)				
	d	Net gain or (loss)				
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a			
	b	Less direct expenses	b			
	c	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities See Part IV, line 19	a			
	b	Less direct expenses	b			
	c	Net income or (loss) from gaming activities				
10a	Gross sales of inventory, less returns and allowances	a				
b	Less cost of goods sold	b				
c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Busn Code			
11a	MANAGEMENT FEE INCOME	900099	130,857	130,857		
b	EVENT INCOME	900099	61,454	61,454		
c						
d	All other revenue					
e	Total. Add lines 11a-11d		192,311			
12	Total revenue. See instructions		20,787,975	192,311	0	3,775,528

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 U.S. See Part IV, line 21	8,593,200	8,593,200		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	111,910	111,910		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	210,800	147,560	42,160	21,080
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	501,194	286,756	207,038	7,400
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	125,695	76,674	43,993	5,028
10 Payroll taxes	51,785	31,589	18,125	2,071
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	171,875	28,214	137,759	5,902
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
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				
14 Information technology				
15 Royalties				
16 Occupancy	21,126	12,887	7,394	845
17 Travel	127		89	38
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	49,736	41,532	5,397	2,807
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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 BOND FINANCING COSTS	219,343	219,343		
b OTHER EXPENSES	59,067	22,110	36,955	2
c PRINTING AND PUBLICATIONS	24,936	12,468		12,468
d SUPPLIES	15,533	13,203	1,553	777
e All other expenses	21,873	9,550	10,529	1,794
25 Total functional expenses. Add lines 1 through 24e	10,178,200	9,606,996	510,992	60,212
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	2,154,587	1	1,581,170
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	478,229	3	357,617
	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	15,625,554	7	15,395,017
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	3,195,055	9	3,400,495
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b	10c	
	11 Investments—publicly traded securities	120,139,546	11	140,076,679
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	2,016,414	15	1,968,451
16 Total assets. Add lines 1 through 15 (must equal line 34)	143,609,385	16	162,779,429	
Liabilities	17 Accounts payable and accrued expenses	98,006	17	84,669
	18 Grants payable	133,916	18	109,573
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	15,560,000	20	15,335,000
	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		23	
	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	52,136,460	25	58,089,372
	26 Total liabilities. Add lines 17 through 25	67,928,382	26	73,618,614
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	61,435,449	27	75,377,014
	28 Temporarily restricted net assets	13,350,658	28	12,888,905
	29 Permanently restricted net assets	894,896	29	894,896
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	75,681,003	33	89,160,815
	34 Total liabilities and net assets/fund balances	143,609,385	34	162,779,429

Part XI Reconciliation of Net AssetsCheck 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	20,787,975
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,178,200
3	Revenue less expenses Subtract line 2 from line 1	3	10,609,775
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	75,681,003
5	Net unrealized gains (losses) on investments	5	2,789,602
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-14,414
9	Other changes in net assets or fund balances (explain in Schedule O)	9	94,849
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	89,160,815

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ 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 ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b 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 ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	X	
c 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	X	
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?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form **990** (2012)

SCHEDULE A
(Form 990 or 990-EZ)

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

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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)		
11g(ii)		
11g(iii)		

(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)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

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.")	7,745,575	7,373,983	7,108,340	9,108,733	16,820,136	48,156,767
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	7,745,575	7,373,983	7,108,340	9,108,733	16,820,136	48,156,767
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)						6,584,471
6 Public support. Subtract line 5 from line 4						41,572,296

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	7,745,575	7,373,983	7,108,340	9,108,733	16,820,136	48,156,767
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,913,553	1,690,548	1,657,862	1,493,540	1,669,280	8,424,783
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.)		158,650	165,712	187,577	192,311	704,250
11 Total support. Add lines 7 through 10						57,285,800
12 Gross receipts from related activities, etc. (see instructions)					12	192,311
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	72.57 %
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	69.03 %
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 III Support Schedule for Organizations Described in Section 509(a)(2)

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

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 section 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)

PART II, LINE 10 - OTHER INCOME DETAIL

ADMINISTRATIVE FEES & EVENT INCOME \$ 704,250

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012Open to Public
Inspection

Name of the organization

Employer identification number

DALLAS JEWISH COMMUNITY FOUNDATION**75-2836123****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	359	0
2 Aggregate contributions to (during year)	15,484,392	
3 Aggregate grants from (during year)	7,316,344	
4 Aggregate value at end of year	45,004,224	

- 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? ☒ Yes ☐ 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? ☒ Yes ☐ 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 Tax 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 Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f 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	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	26,214,782	26,313,954	24,854,735	23,676,075	
b Contributions	1,315,640	976,183	1,961,383	1,962,925	
c Net investment earnings, gains, and losses	2,594,467	320,375	2,863,844	2,790,396	
d Grants or scholarships					
e Other expenditures for facilities and programs	1,079,726	1,256,220	3,074,571	3,219,270	
f Administrative expenses	427,226	139,510	291,437	355,391	
g End of year balance	28,617,937	26,214,782	26,313,954	24,854,735	

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

- a** Board designated or quasi-endowment ► **86.37 %**
b Permanent endowment ► **10.50 %**
c Temporarily restricted endowment ► **3.13 %**
 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
☐ (ii) related organizations

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

	Yes	No
3a(i)		X
3a(ii)	X	
3b	X	

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				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ►

Part VII Investments—Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CUSTODIAL LIABILITIES	57,084,397
(3) LIABILITY FOR SPLIT INT AGREEMENT	1,004,975
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	58,089,372

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

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.

PART X - FIN 48 FOOTNOTE

MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. WITH FEW EXCEPTIONS THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS ENDED ON OR BEFORE JULY 31, 2009.

Part XIII Supplemental Information (continued)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

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

☒ Yes ☐ No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	ADAT CHAVERIM 6300-A INDEPENDENCE PARKWAY PLANO TX 75023	75-2708475	3	5,540				RELIGION
(2)	ADVISORY BOARD BOOKER T. WASHINGTON P. O. BOX 192648 DALLAS TX 75219	74-3068174	3	5,780				EDUCATIONAL
(3)	AKIBA ACADEMY OF DALLAS 12324 MERIT DRIVE DALLAS TX 75251	75-1151383	3	205,499				EDUCATIONAL
(4)	AMERICAN FOUNDATION FOR THE BLIND 11030 ABLES LANE DALLAS TX 75229	13-5562161	3	8,625				DISEASE/DISORDER
(5)	AMERICAN FRIENDS OF YAD ELIEZER 1102 E. 26TH STREET BROOKLYN NY 11210	11-3459952	3	7,950				HUMAN SERVICE
(6)	AMERICAN ISRAEL EDUCATION 251 H STREET NW, SUITE 700 WASHINGTON DC 20001	52-1623781	3	79,939				INTERNATIONAL
(7)	AMERICAN JEWISH COMMITTEE 12720 HILLCREST ROAD, #210 DALLAS TX 75230	13-5563393	3	37,038				PUBLIC AFFAIRS
(8)	AMERICAN JEWISH JOINT DISTRIBUTION 711 THIRD AVENUE NEW YORK NY 10017-4014	13-1656634	3	24,994				HUMAN SERVICE
(9)	AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH ST. NEW YORK NY 10018-7904	22-2584370	3	9,858				HUMAN SERVICE

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

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

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

Schedule I (Form 990) (2012)

DAA

OMB No. 1545-0047

2012

Open to Public
Inspection

Employer identification number

75-2836123

▶ Attach to Form 990.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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**

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	AMERICAN RED CROSS/DALLAS AREA 4800 HARRY HINES BLVD. DALLAS TX 75235-7717	53-0196605	3	15,470				DISASTER RELIEF
(2)	ANN AND NATE LEVINE ACADEMY, 18011 HILLCREST ROAD DALLAS TX 75252-5863	75-2714693	3	458,553				EDUCATIONAL
(3)	ANTI-DEFAMATION LEAGUE 12800 HILLCREST RD DALLAS TX 75230-1514	13-2887439	3	46,437				PUBLIC AFFAIRS
(4)	AT&T PERFORMING ARTS CENTER 2100 ROSS AVENUE, STE 650 DALLAS TX 75201	75-2890923	3	16,007				ARTS, CULTURE
(5)	AUSCHWITZ INSTITUTE FOR PEACE AND 2 WEST 45TH ST., SUITE 1602 NEW YORK NY 10036	20-4714242	3	125,000				HUMAN SERVICE
(6)	AUXILIARY OF SCRIPPS 354 SANTA FE DR. ENCINITAS CA 92024	95-6193243	3	5,500				HEALTH, GENERAL
(7)	B'NAI B'RITH YOUTH ORGANIZATION 2020 K STREET NW, #7400 WASHINGTON DC 20006	31-1794932	3	11,091				YOUTH DEVELOPMENT
(8)	BAYLOR HEALTH CARE SYSTEM FOUNDATIO 3600 GASTON AVENUE, SUITE 100 DALLAS TX 75246-9928	75-1606705	3	9,867				HEALTH, GENERAL
(9)	BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB UT 84741	23-7147797	3	10,000				ANIMAL-RELATED

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

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

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

Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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**

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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

☐ Yes ☐ No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section number, if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	BIBLICAL ARTS CENTER MIRACLE AT 7500 PARK LANE DALLAS TX 75225	75-1222954	3	14,000				ARTS, CULTURE
(2)	BIRTHRIGHT ISRAEL FOUNDATION 33 EAST THIRTY THIRD STREET NEW YORK NY 10016	13-3931912	3	31,825				ISRAEL TEEN TRIPS
(3)	BNAI ZION FOUNDATION, INC. 7920 BELT LINE RD, STE 695 DALLAS TX 75254-8177	13-2572288	3	16,859				INTERNATIONAL
(4)	CAMP RAMAH IN WISCONSIN 65 E. WACKER PLACE, STE 1200 CHICAGO IL 60601	36-6009250	3	19,800				RELIGION
(5)	CAMP YOUNG JUDAEA 5410 BELLAIRE BLVD., SUITE 207 BELLAIRE TX 77401	74-6063430	3	5,805				YOUTH DEVELOPMENT
(6)	CAPITAL CAMPAIGN- GDJC 7800 NORTHAVEN ROAD DALLAS TX 75230	75-2819936	3	11,637				COMM. DEVELOPMENT
(7)	CHABAD LUBAVITCH OF FT. WORTH 5659 WOODWAY DR. FORT WORTH TX 76133	61-1439310	3	10,725				RELIGION
(8)	CHABAD OF NORTH TEXAS INC. 6710 LEVELLAND ROAD DALLAS TX 75252-5925	45-5601290	3	46,003				RELIGION
(9)	CHABAD OF PLANO / COLLIN COUNTY 3904 WEST PARK BLVD. PLANO TX 75075	75-2606764	3	6,910				RELIGION
2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							
3	Enter total number of other organizations listed in the line 1 table							

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

Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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

☐ Yes ☐ No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	CHABAD OF UPTOWN DALLAS 2723 ROUTH STREET DALLAS TX 75201	20-8995841	3	10,500				COMM. DEVELOPMENT
(2)	CHILDREN'S CANCER FUND OF DALLAS 10300 N. CENTRAL EXPRESSWAY DALLAS TX 75231	75-2113401	3	10,250				MEDICAL RESEARCH
(3)	CHILDREN'S MEDICAL CENTER OF DALLAS 2777 STEMMONS FRWY, STE. 700 DALLAS TX 75207	75-0800628	3	22,900				HEALTH, GENERAL
(4)	COMMUNITY HOMES FOR ADULTS INC. 13101 PRESTON RD. SUITE 312 DALLAS TX 75240	75-1894451	3	13,795				HOUSING, SHELTER
(5)	CONGREGATION AGUDATH JACOB 4925 HILLCREST DRIVE WACO TX 76710	74-1200140	3	7,000				RELIGION
(6)	CONGREGATION ANSHAI TORAH 5501 WEST PARKER ROAD PLANO TX 75093	75-1704418	3	41,720				RELIGION
(7)	CONGREGATION BETH ISRAEL 5600 NORTH BRAESWOOD HOUSTON TX 77096	74-1143080	3	5,979				RELIGION
(8)	CONGREGATION BETH TORAH 720 W. LOOKOUT DRIVE RICHARDSON TX 75080	23-7436203	3	26,045				RELIGION
(9)	CONGREGATION OHR HATORAH 6324 CHURCHILL WAY DALLAS TX 75230	75-2803545	3	7,521				RELIGION

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

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

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

Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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**

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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?

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

☐ Yes ☐ No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	CONGREGATION SHAAARE TEFILLA 6131 CHURCHILL WAY DALLAS TX 75230	75-2082492	3	75,418				RELIGION
(2)	CONGREGATION SHEARITH ISRAEL 9401 DOUGLAS AVENUE DALLAS TX 75225-1612	75-0976060	3	545,158				RELIGION
(3)	CONGREGATION TIFERET ISRAEL 10909 HILLCREST ROAD DALLAS TX 75230	75-0871724	3	50,590				RELIGION
(4)	DALLAS AREA HABITAT FOR HUMANITY 2800 N. HAMPTON ROAD DALLAS TX 75212-5029	75-2097161	3	6,000				HOUSING, SHELTER
(5)	DALLAS AREA TORAH ASSOCIATION 5840 FOREST LANE DALLAS TX 75230-2634	75-2246229	3	57,268				RELIGION
(6)	DALLAS BAR ASSOCIATION 2101 ROSS AVENUE DALLAS TX 75201	75-2410525	3	14,160				CIVIL RIGHTS
(7)	DALLAS CHAPTER OF HADASSAH P. O. BOX 795774 DALLAS TX 75379	23-7289943	3	21,414				HUMAN SERVICE
(8)	DALLAS FURNITURE BANK P. O. BOX 815788 DALLAS TX 75381-5788	48-1279673	3	8,800				HUMAN SERVICE
(9)	DALLAS HEBREW FREE LOAN ASSOCIATION P. O. BOX 671235 DALLAS TX 75367-1235	51-0148138	3	8,901				HUMAN SERVICE

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Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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

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Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	DALLAS HOLOCAUST MUSEUM 211 NORTH RECORD ST., STE. 100 DALLAS TX 75202-3361	75-2113723	3	88,708				ARTS, CULTURE
(2)	DALLAS HOME FOR JEWISH AGED, INC. 6101 OHIO DRIVE, SUITE 100 PLANO TX 75024	75-0871733	3	17,880				ELDERLY SERVICES
(3)	DALLAS JEWISH HISTORICAL SOCIETY 7900 NORTHAVEN ROAD DALLAS TX 75230	75-2156817	3	13,684				ARTS, CULTURE
(4)	DALLAS MUSEUM OF ART 1717 NORTH HARWOOD DALLAS TX 75201	75-0808774	3	14,081				ARTS, CULTURE
(5)	DALLAS OPERA MARGOT & BILL 2403 FLORA STREET, SUITE 500 DALLAS TX 75201	75-6004746	3	22,420				ARTS, CULTURE
(6)	DALLAS SUMMER MUSICALS, INC. P O BOX 710336 DALLAS TX 75371	75-1104793	3	8,000				ARTS, CULTURE
(7)	DALLAS SYMPHONY ASSOCIATION 2301 FLORA STREET DALLAS TX 75201	75-0705442	3	53,069				ARTS, CULTURE
(8)	DALLAS THEATER CENTER 2400 FLORA STREET DALLAS TX 75201	75-0959992	3	14,050				ARTS, CULTURE
(9)	DALLAS TORAH INSTITUTE 5840 FOREST LANE DALLAS TX 75230	75-2246229	3	16,100				RELIGION

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Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

**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.

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OMB No. 1545-0047

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Employer identification number

75-2836123

DALLAS JEWISH COMMUNITY FOUNDATION

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	DALLAS WOMEN'S FOUNDATION 8150 N. CENTRAL EXPRESSWAY, DALLAS TX 75206	75-2048261	3	8,700				PHILANTHROPY
(2)	FIRST UNITED METHODIST CHURCH 1928 ROSS AVENUE DALLAS TX 75201	75-0886445	3	12,500				HUMAN SERVICE
(3)	FOUNDATION FOR JEWISH CAMP, INC. 253 WEST 35TH STREET NEW YORK NY 10001	22-3551013	3	11,250				YOUTH DEVELOPMENT
(4)	FRIENDS OF KESHER FOUNDATION, INC. 6710 LEVELLAND RD DALLAS TX 75252	75-2666081	3	11,008				PHILANTHROPY
(5)	FRIENDS OF NORTHAVEN TRAIL P. O. BOX 670325 DALLAS TX 75367	27-2405143	3	14,000				ENVIRONMENTAL
(6)	FRIENDS OF THE ISRAEL DEFENSE FORCE 2040 NE 163RD STREET, NORTH MIAMI BEACH FL 33162	13-3156445	3	50,000				INTERNATIONAL
(7)	FRIENDS OF WEDNESDAY'S CHILD 2801 SWISS AVE., STE. 130 DALLAS TX 75204	75-1995826	3	10,000				YOUTH DEVELOPMENT
(8)	GEORGE W. BUSH FOUNDATION P. O. BOX 600610 DALLAS TX 75360	20-4119317	3	22,000				EDUCATIONAL
(9)	GREENHILL SCHOOL 4141 SPRING VALLEY ROAD ADDISON TX 75001-3683	75-1022742	3	18,400				EDUCATIONAL

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Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

**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.

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OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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?

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

☐ Yes ☐ No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	HADASSAH - THE WOMENS ZIONIST 50 WEST 58TH STREET NEW YORK NY 10019	13-1656651	3	189,019				HUMAN SERVICE
(2)	HAGAR USA INC. C/O TOWN BANK P. O. BOX 180620 DELAFIELD WI 53018	20-1507669	3	10,000				HUMAN SERVICE
(3)	HEBREW UNION COLLEGE-JEWISH INSTITUTE 3101 CLIFTON AVENUE CINCINNATI OH 45220-2488	31-0537067	3	17,900				EDUCATIONAL
(4)	HILLEL COMMUNITY DAY SCHOOL 19000 NE 25TH AVENUE NORTH MIAMI BEACH FL 33180	59-1296635	3	18,000				EDUCATIONAL
(5)	HOBART AND WILLIAM SMITH COLLEGES 300 PULTENEY STREET GENEVA NY 14456	16-0743040	3	45,000				EDUCATIONAL
(6)	HOCKADAY SCHOOL P.O. BOX 299000 DALLAS TX 75229-9965	75-0800650	3	15,350				EDUCATIONAL
(7)	IRVIN M. SHLENKER SCHOOL OF 5600 NORTH BRAESWOOD HOUSTON TX 77096	76-0686559	3	23,000				EDUCATIONAL
(8)	JEWISH AGENCY FOR ISRAEL - NORTH 633 THIRD AVENUE, NEW YORK NY 10017	23-0053483	3	8,080				INTERNATIONAL
(9)	JEWISH CAMPUS ACTIVITIES BOARD 215 SOUTH 39TH STREET PHILADELPHIA PA 19104	23-1365179	3	7,300				YOUTH DEVELOPMENT

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Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

**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.

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Employer identification number

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Part I DALLAS JEWISH COMMUNITY FOUNDATION

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	JEWISH CHILDREN'S REGIONAL SERVICE P.O. BOX 7368 METAIRIE LA 70010-7368	72-0408936	3	43,925				YOUTH DEVELOPMENT
(2)	JEWISH COMMUNITY CENTER 7900 NORTHAVEN ROAD DALLAS TX 75230-3392	75-1461847	3	344,111				COMM. DEVELOPMENT
(3)	JEWISH COMMUNITY HAVURAH 185 N. MOUNTAIN AVE. ASHLAND OR 97520-1224	93-0895258	3	57,000				RELIGION
(4)	JEWISH COUNCIL FOR PUBLIC AFFAIRS P. O. BOX 1415 NEW YORK NY 10156-1415	13-1624104	3	12,100				PUBLIC AFFAIRS
(5)	JEWISH FAMILY SERVICE OF DALLAS, IN 5402 ARAPAHO ROAD DALLAS TX 75248-7098	75-1992728	3	388,551				HUMAN SERVICE
(6)	JEWISH FEDERATION OF GREATER DALLAS 7800 NORTHAVEN ROAD DALLAS TX 75230	75-0800654	3	2,147,673				COMM. DEVELOPMENT
(7)	JEWISH FEDERATION OF GREATER 710 W. WILSHIRE BLVD., OKLAHOMA CITY OK 73116	73-0579276	3	7,552				COMM. DEVELOPMENT
(8)	JEWISH FEDERATION OF WACO DBA P. O. BOX 8031 WACO TX 76714-8031	74-1167963	3	50,100				COMM. DEVELOPMENT
(9)	JEWISH LIFE NETWORK 6906 OLD PRESTON PLACE DALLAS TX 75252	27-3450821	3	25,440				COMM. DEVELOPMENT

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Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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.

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OMB No. 1545-0047

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Inspection**

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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?

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

Yes No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JEWISH STUDIES INITIATIVE 3831 DUCHESS TRAIL DALLAS TX 75229	TX 75229	01-0967102	3	28,450				EDUCATIONAL
(2) KID NET FOUNDATION DBA P.O. BOX 140085 DALLAS TX 75214	TX 75214	75-2389331	3	12,100				HOUSING, SHELTER
(3) MARCH OF DIMES TX CHAPTER 12660 COIT ROAD, STE 200 DALLAS TX 75251	TX 75251	13-1846366	3	5,775				DISEASE/DISORDER
(4) MOISHE FOUNDATION 1330 BROADWAY STREET OAKLAND CA 94612	CA 94612	26-2599786	3	39,250				HOUSING, SHELTER
(5) MT. CRESTED BUTTE PO BOX 4403 CRESTED BUTTE CO 81224	CO 81224	27-1555561	3	25,000				ARTS, CULTURE
(6) NATIONAL COUNCIL OF JEWISH WOMEN 475 RIVERSIDE DRIVE, NEW YORK NY 10115	NY 10115	13-1641076	3	5,100				HUMAN SERVICE
(7) NATIONAL COUNCIL OF JEWISH WOMEN 6025 ROYAL LANE, DALLAS TX 75230	TX 75230	75-0800635	3	32,850				HUMAN SERVICE
(8) NEIGHBORS UNITED FOR 924 WAYNE STREET DALLAS TX 75223	TX 75223	75-1612054	3	5,300				EDUCATIONAL
(9) NEW ISRAEL FUND P. O. BOX 96712 WASHINGTON DC 20090-6712	DC 20090-6712	94-2607722	3	6,050				CIVIL RIGHTS

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

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Schedule I (Form 990) (2012)

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(Form 990)**

Department of the Treasury
Internal Revenue Service

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☐ Yes ☐ No

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(1)	NORTH TEXAS FOOD BANK 4500 SOUTH COCKRELL HILL ROAD DALLAS TX 75236	75-1785357	3	56,449				FOOD, NUTRITION
(2)	NORTH TEXAS PUBLIC BROADCASTING INC 3000 HARRY HINES DALLAS TX 75201	75-2084961	3	16,981				ARTS, CULTURE
(3)	PARKLAND FOUNDATION 2777 N. STEMMONS FREEWAY, DALLAS TX 75207	75-2089180	3	12,200				COMM. DEVELOPMENT
(4)	PEF ISRAEL ENDOWMENT FUNDS, INC. 317 MADISON AVENUE, NEW YORK NY 10017	13-6104086	3	247,580				COMM. DEVELOPMENT
(5)	PEROT MUSEUM OF NATURE AND SCIENCE 2201 N. FIELD STREET DALLAS TX 75201	75-6067569	3	24,376				SCIENCE
(6)	PLANNED PARENTHOOD OF GREATER TEXAS 7424 GREENVILLE AVENUE, DALLAS TX 75231	52-1243220	3	16,263				HEALTH, GENERAL
(7)	PLANNED PARENTHOOD OF GREATER TEXAS 7424 GREENVILLE AVENUE, DALLAS TX 75231	20-1121091	3	10,450				HEALTH, GENERAL
(8)	PRESIDENT & TRUSTEES OF COLBY COLLE 4322 MAYFLOWER HILL DR. WATERVILLE ME 04901-8843	01-0211497	3	10,000				EDUCATIONAL
(9)	PROJECT KESHER 2144 ASHLAND AVE, STE 3 EVANSTON IL 60201-3081	36-3673594	3	10,000				HUMAN SERVICE

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(Form 990)**

Department of the Treasury
Internal Revenue Service

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

☐ Yes ☐ No

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section, if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	RAYMOND AND RUTH PERELMAN JEWISH 49 HAVERFORD ROAD WYNNEWOOD PA 19096	23-1496890	3	10,000				EDUCATIONAL
(2)	RETINA FOUNDATION OF THE SOUTHWEST 9600 NORTH CENTRAL EXPWY, DALLAS TX 75231	51-0151514	3	5,079				DISEASE/DISORDER
(3)	ROCKY MOUNTAIN BIOLOGICAL P. O. BOX 519 CRESTED BUTTE CO 81224	84-6050523	3	5,180				ENVIRONMENTAL
(4)	SIGMA ALPHA MU FOUNDATION 8701 FOUNDERS ROAD INDIANAPOLIS IN 46268	13-6093817	3	10,000				FRATERNAL ORDERS
(5)	SOCIETY FOR CLASSICAL REFORM JUDAISM 15 NEWBURY STREET BOSTON MA 02116-3105	26-1670104	3	19,000				RELIGION
(6)	ST. MARK'S SCHOOL OF TEXAS 10600 PRESTON ROAD DALLAS TX 75230	75-0827460	3	71,050				EDUCATIONAL
(7)	ST. PHILLIPS SCHOOL AND 1600 PENNSYLVANIA AVE. DALLAS TX 75215	75-1097360	3	9,600				EDUCATIONAL
(8)	TEMPLE EMANU-EL 8500 HILLCREST ROAD DALLAS TX 75225-4288	75-0808773	3	346,167				RELIGION
(9)	TEMPLE SHALOM 6930 ALPHA ROAD DALLAS TX 75240	75-1231572	3	28,844				RELIGION

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75-2836123

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?

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

Yes No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	TEXAS HEALTH PRESBYTERIAN FOUNDATION 8440 WALNUT HILL LANE DALLAS TX 75231-3825	75-2022128	3	6,900				HEALTH, GENERAL
(2)	TEXAS HILLEL FOUNDATION 2105 SAN ANTONIO STREET AUSTIN TX 78705-5521	52-1758802	3	40,059				YOUTH DEVELOPMENT
(3)	TEXAS SCOTTISH RITE HOSPITAL 2222 WELBORN STREET DALLAS TX 75219	75-0818178	3	13,659				HEALTH, GENERAL
(4)	TEXAS TORAH INSTITUTE 6506 FRANKFORD ROAD DALLAS TX 75252	02-0699665	3	5,180				EDUCATIONAL
(5)	THE LEGACY SENIOR COMMUNITIES, INC. 6101 OHIO DRIVE, SUITE 100 PLANO TX 75024	03-0435268	3	121,350				ELDERLY SERVICES
(6)	THE SHUL OF BAL HARBOUR 9540 COLLINS AVENUE SURFSIDE FL 33154	59-2302315	3	44,100				RELIGION
(7)	TORAH DAY SCHOOL OF DALLAS 6921 FRANKFORD ROAD DALLAS TX 75252	16-1626550	3	54,000				EDUCATIONAL
(8)	TRUSTEES OF THE UNIVERSITY OF 3733 SPRUCE STREET, 344 PHILADELPHIA PA 19104	23-1352685	3	33,100				EDUCATIONAL
(9)	TRUSTEES OF TUFTS COLLEGE P. O. BOX 3306 BOSTON MA 02241-3306	04-2103634	3	20,000				EDUCATIONAL
2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							
3	Enter total number of other organizations listed in the line 1 table							

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

Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

**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

75-2836123

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	UNION FOR REFORM JUDAISM 633 THIRD AVENUE, FLOOR 7 NEW YORK NY 10017	13-1663143	3	22,450				YOUTH DEVELOPMENT
(2)	UNITED STATES HOLOCAUST P.O. BOX 90988 WASHINGTON DC 20090-0988	52-1309391	3	14,800				ARTS, CULTURE
(3)	UNITED WAY OF METROPOLITAN DALLAS 1800 NORTH LAMAR STREET DALLAS TX 75202	75-6005352	3	33,380				HUMAN SERVICE
(4)	UNIVERSITY OF MIAMI 5665 PONCE DE LEON BOULEVARD CORAL GABLES FL 33146	59-0624458	3	20,000				EDUCATIONAL
(5)	UNIVERSITY OF TEXAS AT AUSTIN P.O. BOX 7458 AUSTIN TX 78713	74-6000203	3	25,050				EDUCATIONAL
(6)	UNIVERSITY OF TEXAS AT AUSTIN P.O. BOX 7727 AUSTIN TX 78713-9953	74-1587488	3	40,000				EDUCATIONAL
(7)	UNIVERSITY OF TEXAS AT DALLAS MS. JO 31, 800 W. CAMPBELL RD. RICHARDSON TX 75080-3021	75-1305566	3	27,034				EDUCATIONAL
(8)	UNIVERSITY OF TEXAS FOUNDATION, INC P.O. BOX 250 AUSTIN TX 78767-0250	74-1587488	3	10,179				DISEASE/DISORDER
(9)	UNIVERSITY OF TEXAS LAW 727 E. DEAN KEETON STREET AUSTIN TX 78705	74-6056794	3	45,500				EDUCATIONAL

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

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

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

Schedule I (Form 990) (2012)

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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**

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	URJ CAMP NEWMAN 711 GRAND AVENUE, SUITE 280 SAN RAFAEL CA 94901	13-1663143	3	100,000				YOUTH DEVELOPMENT
(2)	VICKERY MEADOW LEARNING CENTER 6329 RIDGECREST DALLAS TX 75231	75-2708992	3	10,490				EDUCATIONAL
(3)	VOGEL ALCOVE CHILDCARE PO BOX 150948 DALLAS TX 75315	75-2133827	3	52,017				EDUCATIONAL
(4)	WILLIAM J. CLINTON FOUNDATION 77 WATER STREET NEW YORK NY 10005	31-1580204	3	10,000				HUMAN SERVICE
(5)	WORLD OF CHILDREN 6200 STONERIDGE MALL ROAD, PLEASANTON CA 94588	31-1772381	3	10,000				YOUTH DEVELOPMENT
(6)	YAVNEH ACADEMY 12324 MERIT DRIVE DALLAS TX 75251	75-2470261	3	296,859				EDUCATIONAL
(7)	YESHIVA UNIVERSITY 500 WEST 185TH STREET NEW YORK NY 10033-3201	13-1624225	3	12,105				EDUCATIONAL
(8)	THE WISE ACADEMY 6938 DESCO PLACE DALLAS TX 75225-1723	75-2655587	3	7,030				EDUCATIONAL
(9)								

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

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

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

Schedule I (Form 990) (2012)

DAA

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
1 EDUCATIONAL	7	49,700			
2 EDUCATIONAL SCHOLARSHIPS	15	41,395			
3 HEALTH, GENERAL	1	79			
4 PHILANTHROPY	1	20,736			
5					
6					
7					

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

THE ORGANIZATION DOES MONITOR AND ENSURE THAT THE CHARITABLE PURPOSES ARE SATISFIED.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

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 uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☐ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.

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:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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.

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.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2012

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 MEYER L. BODOFF PRESIDENT/CEO	(i) 194,583 (ii) 0	0	0	0	0	194,583	0
2	(i) (ii)						
3	(i) (ii)						
4	(i) (ii)						
5	(i) (ii)						
6	(i) (ii)						
7	(i) (ii)						
8	(i) (ii)						
9	(i) (ii)						
10	(i) (ii)						
11	(i) (ii)						
12	(i) (ii)						
13	(i) (ii)						
14	(i) (ii)						
15	(i) (ii)						
16	(i) (ii)						

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.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

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) Pooled financing	
						Yes	No	Yes	No	Yes	No
A COLORADO EDUCATIONAL AND CULTURAL	34-0896727	196458YV9	11/15/04	18,275,000	CAPITAL PROJECTS		X		X		X
B											
C											
D											

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue								
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								
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion								
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						

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

DAA

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?								
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?		X						
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?								
2 If "No" to line 1, did the following apply?		X						
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 the hedge terminated?								

DAA

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

[illegible]

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Noncash Contributions

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

OMB No 1545-0047

2012

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DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number
75-2836123

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	73	4,634,727	FMV
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				
16 Real estate—Commercial				
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 ►()	X	10	2,263	FMV
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?

b If "Yes," describe the arrangement in Part II

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

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

b If "Yes," describe in Part II

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

Yes No

30a		X
31	X	
32a		X

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.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public
Inspection

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
TO PROMOTE OR SUPPORT BY DIRECT ACTION OR PROGRAMS; BY MAKING GRANTS
DIRECTLY; OR BY MAKING GRANTS TO OTHER ORGANIZATIONS; TO ACCOMPLISH
PURPOSES WHICH ARE IN KEEPING WITH THE JEWISH TRADITION OF PERFORMING ACTS
OF RIGHTEOUSNESS AND ACTS OF LOVING KINDNESS (GEMILUT CHESED) AND THE
JEWISH TRADITION OF TIKKUN OLAM (REPAIRING AND IMPROVING THE WORLD IN WHICH
WE LIVE); AND/OR WHICH HELP ASSURE THE CONTINUITY OF A STRONG AND VIBRANT
JEWISH COMMUNITY IN DALLAS, IN ISRAEL AND THROUGHOUT THE WORLD.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS
WALDMAN BROTHERS

EMPLOYEE

INSURANCE POLICIES

LEVINE FAMILY FOUNDATION

VICE PRES

SUPPORTING FOUNDATION

PRESCOTT PAILET BENEFITS, LP

EMPLOYEE

INSURANCE POLICIES

JEWISH FEDERATION OF GREATER DALLAS

CHAIRMAN

DONEE/RENTAL

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

SCHULTZ FAMILY FOUNDATION

VICE PRES

SUPPORTING FOUNDATION

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE BOARD OF DIRECTORS WILL RECEIVE A DRAFT OF THE RETURN TO COMMENT ON.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES
COMPLIANCE WITH THE POLICY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD DECIDES CEO PAY AND REVIEWS FOR CURRENT EMPLOYEES.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE BOARD DECIDES CEO PAY AND REVIEWS FOR CURRENT EMPLOYEES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES - OTHER		
CHANGE IN VALUE OF SPLIT INTERESTS	\$	62,110
CHANGE IN CSV LIFE INSURANCE	\$	32,739

SCHEDULE R
(Form 990)

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

Department of the Treasury
Internal Revenue Service

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(1)	(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
(2)						
(3)						
(4)						
(5)						

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.)

(1)	(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?
(1)	NATE AND ANN LEVINE FAMILY FDN 12700 HILLCREST ROAD, SUITE 201 75-2510543 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A	X
(2)	THE GOLD FAMILY FOUNDATION 12700 HILLCREST ROAD, SUITE 201 75-2141247 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A	X
(3)	THE KIRSCHNER-BOOKATZ FAMILY FDN 12700 HILLCREST ROAD, SUITE 201 75-2759108 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A	X
(4)	HOWARD & LESLIE SCHULTZ FAMILY FDN 12700 HILLCREST ROAD, SUITE 201 75-2188255 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A	X
(5)	LAWRENCE E STEINBERG FOUNDATION 12700 HILLCREST ROAD, SUITE 201 75-2741258 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A	X

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

Schedule R (Form 990) 2012

DAA

SCHEDULE R
(Form 990)

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

Department of the Treasury
Internal Revenue Service

Name of the organization

DALLAS JEWISH COMMUNITY FOUNDATION

Employer identification number

75-2836123

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(1)	(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
(2)						
(3)						
(4)						
(5)						

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
(1)	NORTHAVEN CHARITABLE GIVING FDN 12700 HILLCREST ROAD, SUITE 201 75-2741258 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A		X
(2)	THE COBEN FOUNDATION 12700 HILLCREST ROAD, SUITE 201 75-2181111 DALLAS TX 75230	CHARITABLE	TX	501C3	11A	N/A		X
(3)	DJCF HOLDING CORPORATION 12700 HILLCREST ROAD, SUITE 201 75-2845958 DALLAS TX 75230	CHARITABLE	TX	501C2	7	N/A		X
(4)								
(5)								

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

Schedule R (Form 990) 2012

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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) Dispro- portionate alloc.?		(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	
(1)													
(2)													
(3)													
(4)													

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
(1)										
(2)										
(3)										
(4)										

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)**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
(1)	DJCF HOLDING CORPORATION	C	137,975	
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Part VII Supplemental Information

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

Form

8868

(Rev. January 2013)

Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	DALLAS JEWISH COMMUNITY FOUNDATION	75-2836123
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
File by the due date for filing your return. See instructions	12700 HILLCREST RD, SUITE 201	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	DALLAS TX 75230-3296	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

DALLAS JEWISH COMMUNITY FOUNDATION
7800 NORTHAVEN ROAD

- The books are in the care of ► **DALLAS**

TX 75230-3296Telephone No ► **214-615-9351**

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **03/17/14**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ☐ calendar year _____ or

► ☒ tax year beginning **08/01/12**, and ending **07/31/13**

- If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2013)

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DAL01904

DAL01504

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	DALLAS JEWISH COMMUNITY FOUNDATION	75-2836123
	Number, street, and room or suite no. If a P.O. box, see instructions 12700 HILLCREST RD, SUITE 201	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions DALLAS TX 75230-3296	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

DALLAS JEWISH COMMUNITY FOUNDATION
7800 NORTHAVEN ROAD

- The books are in the care of **DALLAS** Telephone No **214-615-9351** FAX No **TX 75230-3296**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **06/16/14**.
- 5 For calendar year **08/01/12**, or other tax year beginning **08/01/12**, and ending **07/31/13**
- 6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature **Elean S Wright** Title **CPA FOR THE TAXPAYER** Date **01/29/14**