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Form **990** 

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

OMB No 1545-0047

2013

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u>	For the	2013 cale	endar year, or tax year beg	nning	, 2013,	and ending			, 20	
В	Check If	applicable	C Name of organization Yehr	da & Anne Neuberge	r Foundation, Ir	nc.		D Employ	er identification n	umber
	Address	change	Doing Business As					27-1040	)796	
	Name ch	nange	Number and street (or P O. b	ox if mail is not delivered to	street address)	Room/suite	•	E Telepho	one number	
, $\square$	Initial ret	_	101 West Mount Royal	Avenue				410-723	7-4828	
$\sqcap$	Terminat		City or town, state or province		ın postal code			.10 .2.		
	Amende		Baltimore, MD 21201-5	-	, •			<b>G</b> Gross r	acounts &	364,599
H					-		14(2) 12 45-2 2 2		r subordinates? X Yes	
ш	Applicat	ion pending	F Name and address of princip	ai Officer						
_			<b>I</b>		<u>,                                    </u>				es included? 🗌 Yes a list (see instruction	
<u> </u>		mpt status	∑ 501(c)(3) ☐ :	501(c) ( ) ◀ (insert no	)	527	⊣			лы
J	Website				···		H(c) Group			
K		_	<del></del>	Association ☐ Other ►	L Ye	ear of formation	n 2009	M State	e of legal domicile	MD
L	art I	Summ								
	1	-	escribe the organization's						· <del></del>	
Activities & Governance			e, educational and religio		<del>-</del>					*
a.			ed). The Foundation mal							ssociated
ě	2	Check th	nis box $ ightharpoonupigl $ if the organiz	ation discontinued its	operations or d	disposed of	more than	25% of	its net assets.	
Ó	3	Number	of voting members of the	governing body (Part	VI, line 1a)			3		6
∞ಶ	4	Number	of independent voting me	embers of the governi	ng body (Part V	'I, line 1b)		4		3
ies	5	Total nur	mber of individuals emplo	yed in calendar year 2	2013 (Part V, lin	e 2a) .		5		0
₹	6		mber of volunteers (estim	•				6		5
Ş	7a		related business revenue					7a		<del></del>
_	b		elated business taxable in					7b	<del> </del>	
	<del> </del> -	1100 0			.,	Ì	Prior Ye		Current Y	ear
_	8	Contribu	itions and grants (Part VII	Line 1h)		🗀	,	220,000		290,000
Jue .	9		service revenue (Part VII	•				220,000		0
Revenue	10	-	ent income (Part VIII, colu			<del></del>	· · · · · · · · · · · · · · · · · · ·	12,256		74,599
8	11		venue (Part VIII, column (	• •	-			12,230	<del> </del>	17,577
	12		renue—add lines 8 through					232,256	<del>                                     </del>	364,599
									+···	
	13		and similar amounts paid	•		-		375,000		310,119
	14		paid to or for members (			<b>—</b>			<del> </del>	0
Expenses	15		other compensation, emp	-				<del></del>	ļ	0
ens	16a		onal fundraising fees (Par		-		-A 88 8 8 6			0
Ž	·  b		ndraising expenses (Part I					<u> Kab</u>	, ' ' ;	, ,43
ш	17	Other ex	penses (Part IX, column (	A), lines 11a-11d, 11f	–24e)	· · ·		2,333	<del></del>	1,188
	18	Total exp	penses. Add lines 13-17	must equal Part IX, co	Jumn (A) tine 2	ENVED-		377,333	•	311,307
_	19	Revenue	e less expenses. Subtract	line 18 from line 12				145,077	1	53,292
5	8				(a)	B	eginging of Cu	rrent Year	End of Ye	ar
Net Assets or	20	Total ass	sets (Part X, line 16) .		ම් . AUG 1	L <b>2</b> 2014⊟		489,172		548,252
\$ 3	21	Total liab	bilities (Part X, line 26) .				RS	0		0
, ຂໍ	22	Net asse	ets or fund balances. Sub	tract line 21 from line	20 OCDE	EN TIT		489,172		548,252
	art II	Signa	ture Block			_14, 01				
Ū	nder pena	alties of perju	ury, I declare that I have examin	ed this return, including acc	ompanying schedule	es and statem	ents, and to the	he best of	my knowledge and	belief, it is
tr	ue, correc	t, and comp	olete Declaration of preparer oti	ner than officer) is based on	all information of wh	hich preparer l	nas any knowl	edge (		
	•	1						8	7119	
Si	gn	Sigr	nature of officer				Da	te		
H	ere	Ma	arc.B. Terrill	Secretary/Treasur	er					
			e or print name and title					->		
	- ! - !	<u> </u>	ype preparer's name	Preparer's signature	e	Date	e	Charle	PTIN	
	aid							Check self-em	_	
	Preparer Lisa Only Firm's name							n's EIN ▶	<u> </u>	
U	se On	יי עי	address >					ne no.		
M	av the II		address > ss this return with the pre	parer shown above?	see instructions	3 .		· ·	TYe:	s 🗌 No
_			uction Act Notice, see the	· · · · · · · · · · · · · · · · · · ·		·, · · ·	· · · ·	<del></del>		990 (2013)
	autn	ひしん ひせばし	いっいつい へっこ けいいしせ, 5せせ いせき	reparate monucliums.					1 01111 4	(-010)

(Code:	) (Expenses \$	including gra	nts of \$	) (Revenue \$	)
		·····	·····		
		<u> </u>			
Other progr	ram services (Describe in Scho	edule O.)			
(Expenses S		ants of \$	) (Revenue \$	)	
Total progra	am service expenses	310,119			
-					Form <b>990</b> (20

Form 99				Page 3
Part	V Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		NO
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	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	3	^	x
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	:	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	***		
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		X
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>x</u>
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		X X
12 a	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		<u>X</u>
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		X
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		X
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		<u>X</u> _
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	990	(2012)
		LOIL		(という)

	0 (2013)	_		Page
Part •	Checklist of Required Schedules (continued)			т
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	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	23	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 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		X
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		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	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		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	27		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):		٠ ٧,	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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	33	_	х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? <i>If "Yes," complete Schedule R, Part VI</i>	37		x

38

Form **990** (2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response or note to any line in this Po

	Check it Schedule O contains a response or note to any line in this Part V			. L
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	<u>)</u>	,	
b	The state of the s	<u> </u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			-
2-	reportable gaming (gambling) winnings to prize winners?	1c	<u> </u>	<del> </del>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1
_		의· <b>~</b>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	3 <	ļ
3a	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?			
b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		<u> </u>	┼
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶	100	<u>`</u>	*
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		×	2"
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	1 3	`	3,3
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	*	
	and services provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			3.7
		7c		X
d e	If "Yes," indicate the number of Forms 8282 filed during the year	7e		X
f	Did the organization receive any funds, directly of indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>6</del>		$\frac{\lambda}{X}$
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		+
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7.3		* 1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ì
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	04. 3		j /k,
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	, j		S\$ -
а	Initiation fees and capital contributions included on Part VIII, line 12	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	-\		*
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	4		
	against amounts due or received from them.)		3	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<del> </del>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	120		<b>†</b>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	$\dashv$		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		1
•	Note. See the instructions for additional information the organization must report on Schedule O.	1.54	<del> </del>	1
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			1
C	Enter the amount of reserves on hand	1.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Form 99	00 (2013)			1	age 6
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	rough 7b below, s in Schedule O. S	and f	or a	"No"
	Check if Schedule O contains a response or note to any line in this Part VI				
Secti	on A. Governing Body and Management				
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	<b>1a</b> 6		Yes	No
b	committee, explain in Schedule O.  Enter the number of voting members included in line 1a, above, who are independent .	1b 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?	relationship with	2	X	
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other	er person? .	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		<u>X</u>
5 6	Did the organization become aware during the year of a significant diversion of the organization based on the organization have members or stockholders?	on's assets? .	5	77	X
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a	X	<del></del>
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b	x	
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	dertaken during			
а	The governing body?		8a	X	
þ	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule Company of the cannot be addressed in the cannot be addressed	)	9		<u>X</u>
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue Co		
10a	Did the argenization have lead shorters branches or offiliates?		40-	Yes	No
b	Did the organization have local chapters, branches, or affiliates?	such chapters.	10a		<u>X</u>
	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befor		11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				·
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12a 12b	X X	
С	Did the organization regularly and consistently monitor and enforce compliance with the process describe in Schedule O how this was done		12c	x	
13	Did the organization have a written whistleblower policy?		13		<u>X</u>
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation		14		X
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	]	X
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or simi with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o safeguard the	16b		
Secti	on C. Disclosure	<u> </u>	IUU	I	
17 18	List the states with which a copy of this Form 990 is required to be filed ► None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	501(c	)(3)s	only)
19	Own website Another's website Upon request Other (explain in Sch Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.		erest p	olicy	, and
20	State the name, physical address, and telephone number of the person who possesses the boorganization: Marilyn Loux 101 West Mount Royal Avenue Baltimore. MD 21201 41		of the		

Form	990	(2013)	
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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization no	or any relate	d orga	aniz	atic	n c	ompe	nsa	ated any currer	nt officer, directo	r, or trustee.	
(A) Name and Title	(B) Average hours per week (list any	(do n box, i office	ot ch unles er and	Pos neck ss pe	c) sition more erson lirect	e than out the thick the t	one n an tee)	from	(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Yehuda Neuberger	1.0										
President and Donor Director	† <u></u>	X		$\mathbf{x}$				0	o	0	
(2) Anne Neuberger	1.0								- ''11'		
Vice President and Donor Director		X		X				0	0	0	
(3) Marc B. Terrill	1.0										
Secretary/Treasurer and Public Director	40.0	X		X				0	634,883	88,250	
(4) Bruce Sholk	1.0									-	
Public Director		X		X				0	0	0	
(5) Genine Macks Fidler	1.0										
Public Director		X						0	0	0	
(6) Laurence Katz	1.0										
Public Director		X						0	0	0	
(7)											
(8)											
(9)	<u></u>									· · · · · · · · · · · · · · · · · · ·	
(10)	ļ					a		,			
(11)										<u> </u>	
(12)	+										
(13)	<del></del>										
(14)								_			

Form **990** (2013)

Part	(A) Name and title		(C) Position (do not check more than obox, unless person is both officer and a director/trust						(D)  Reportable compensation	(E) Reportab compensation	ile n from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M	ons	other compensation from the organization and related organizations
(15)					   	-	<u> </u>					
(16)						-						
(17)												
(18)						-						<del></del>
(19)						_				<del></del>		***
(20)												<del>,,,,</del>
(21)												
(22)												
(23)		<u> </u>										
(24)											-	<u> </u>
(25)					_							
1b c	Sub-total	VII, Sectio		•	•	· ·	•	<b>&gt;</b>	0		,883	88,250
d 2	Total (add lines 1b and 1c)  Total number of individuals (including but reportable compensation from the organic	not limited						<b>▶</b> e) w	ho received m	·	,883   00,000 (	88,250 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	est compe	nsated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual											4 X
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc	dıvidual 	5 X
Section	on B. Independent Contractors										4	
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	Iress							(B) Description of s	ervices	С	(C) ompensation
None					_					-		
			_									
		<u> </u>							<del>-</del>			
2	Total number of independent contractor received more than \$100,000 of compensations.							th	nose listed abo	ove) who		- ^^^ ~ ~ ~

Part	VIII	Statement of Rever				. Dt			
- 129. °		Check if Schedule O	contains a resp	oonse or note to	(A) Total revenue	Re e fu	(B) lated or xempt inction evenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
Gifts, Grants llar Amounts	1a b c d	Federated campaigns Membership dues Fundraising events Related organizations	1b 1c		'a ship '	ें	` *	4	312-314
Contributions, Giff and Other Similar	e f g	Government grants (contr All other contributions, gift and similar amounts not incl Noncash contributions include	ts, grants, uded above 1f	290,000	ĝ ž				ę s
	h	Total. Add lines 1a-1f	<u> </u>	<u></u> . ▶	290,000		*		3 \%
Program Service Revenue	2a b c d	All all and an analysis		Business Code					
ē.	1	All other program servi		<b>•</b>	0	₹	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
<u>a</u>	3 4	Investment income (i and other similar amou Income from investment	ncluding divide ints) of tax-exempt bo	ends, interest,	62,453	•	* *		62,453
	5	Royalties		▶				. , ,	
	6a b c	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal		·	<b>,^</b> *		
	d	Net rental income or (le		•	0				
	7a	Gross amount from sales of	(i) Securities	(II) Other	<u> </u>				
	b	assets other than inventory Less. cost or other basis	12,146	.,				* *	
	c d	and sales expenses Gain or (loss) Net gain or (loss) .	12,146	0 <b>▶</b>	12,146	2	<u> 1</u>	<u> </u>	12,146
Other Revenue	8a	Gross income from fur events (not including \$				**************************************		. , , ,	
ther R		of contributions reported See Part IV, line 18	a			~ <b>*</b> `.	*		* *
Ó	С	Less: direct expenses Net income or (loss) fro Gross income from gar See Part IV, line 19	om fundraising and ming activities.		0	*	\ 		* /
	b c 10a	Less: direct expenses Net income or (loss) fro Gross sales of inv returns and allowances	om gaming activentory, less	vities ►	0				
	b b	Less: cost of goods so Net income or (loss) fro Miscellaneous Re	old <b>b</b>	entory ► Business Code	0				
	44-	IVIISCOIIGIIGOUS NO				<b> </b>	<del></del>		
	11a b c d	All other revenue .							
	е	Total. Add lines 11a-1	1d	▶	0				
	12	Total revenue. See ins			364,599				74,599

#### Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns.	All other organization	ns must complete co	olumn (A)
	Check if Schedule O contains a respon	se or note to any li	ne in this Part IX		
Do no Bb, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	310,119	310,119		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				-
7 8	Other salaries and wages				
9 10 11	Other employee benefits				
a b c d	Management				
e f g	Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,155		1,155	
12 13 14 15 16 17	Advertising and promotion				
19 20 21 22 23	for any federal, state, or local public officials  Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance				
24 a	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.)				
b c d					
e 25 26	All other expenses Miscellaneous  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	33 311,307	310,119	33 1,188	
	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)				

34

<b>-</b>	000 (0	1013)			
	n 990 (2 <b>art X</b>	·			Page 1
يكور	artA	Check if Schedule O contains a response or note to any line in this Pa	-1.77		<del></del>
		Check if Schedule o Contains a response or note to any line in this Pa		<del></del>	· · · · · L
	T		(A) Beginning of year	<u>.</u>	(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	<u> </u>
	4	Accounts receivable, net	XX X	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			* * * * *
			- 4.8% Ax .	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		3	**
ts		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
A	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		4 Š	
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	489,172	+	548,25
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15 16	Other assets. See Part IV, line 11		15	
_	17	Total assets. Add lines 1 through 15 (must equal line 34)	489,172		548,25
	18	Accounts payable and accrued expenses		17	<u> </u>
	19	Grants payable		18 19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Ś	22	Loans and other payables to current and former officers, directors,	APART TO CARRO	21	
bilities		trustees, key employees, highest compensated employees, and			
Liab	l	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		05	
	26	Total liabilities. Add lines 17 through 25	0	25 26	
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	Tree lands	20	<b>4</b> (*): (4): (5)
nces	07	complete lines 27 through 29, and lines 33 and 34.		, 	
ag	27	Unrestricted net assets	489,172	27	548,25
Õ	28 29	Temporarily restricted net assets	<u> </u>	28	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
ō	20	complete lines 30 through 34.			<u>.:                                    </u>
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
et,	33	Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances	400 170	32	540.05
Z	, <del></del>	TOTAL HEL ASSETS OF TUTTO DATA TICES	489,172	33	548,253

548,252

548,252

489,172

Part	XI Reconciliation of Net Assets			-	
•	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		364	4,599
2	Total expenses (must equal Part IX, column (A), line 25)	2		31	1,307
3	Revenue less expenses. Subtract line 2 from line 1	3			3,292
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		489	9,172
5	Net unrealized gains (losses) on investments	5			5,788
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		548	8,252
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line 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," ex	ıplain ır	ا را ۱		*
	Schedule O.		<u> </u>		·\$ ·\$
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled o	r   *	- 4	\$ \$ ^~
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		- <u></u>		_ تنگر
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	۱		e .
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			ــــــــــــــــــــــــــــــــــــــ	**
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for c				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, e.	xplaın ir	۱ ۱		3
	Schedule O.	_		المشد	
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?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		L
			Form	990	(2013)

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

# **Public Charity Status and Public Support**

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

	uda & Anne Neub							27-10407	96			
	rt Reason	tor Public Cha	rity Status (All orga	anization	s must d	complete	this pa	rt.) See	instructi	ons.		
ine (			ation because it is: (Fo									
1			ches, or association of			ed in <b>sec</b>	tion 170	(b)(1)(A)(	i).			
2			170(b)(1)(A)(ii). (Atta									
3	☐ A mospital or	a cooperative no	spital service organiz	ation des	cribed in	section	170(b)(1)	(A)(iii).				
4		ne, city, and stat	on operated in conjunte:	iction witi	n a nospii	tal descri	bed in <b>s</b> e	ection 17	O(b)(1)(A)	(iii). Ente	r the	
5	☐ An organizati	-	the benefit of a colle	ge or un	iversity o	wned or	operated	by a go	vernmen	tal unit d	escrib	ped in
6	☐ A federal, stat	te, or local gover	nment or government	tal unit de	scribed i	n section	170(b)(	1)(A)(v).				
7	An organization	on that normally	receives a substantia	al part of	its suppo	ort from a	a govern	mental ur	nit or from	n the ger	neral p	oublic
8			in section 170(b)(1)(A		mplete Pa	art II.)						
9			receives: (1) more th				om contr	ibutions.	members	ship fees.	and	aross
	receipts from	activities relate	d to its exempt funct	tions—su	bject to	certain e	xceptions	s, and (2)	no mor	e than 33	31/3%	of its
	support from	gross investme	ent income and unre after June 30, 1975. S	lated bus	siness ta	xable ind	come (le:	ss sectio	n 511 ta	x) from	busin	esses
10			d operated exclusively					•	<i>(</i> 4)			
11			nd operated exclusiv							or to on	<b></b>	ıt tha
•	purposes of o	one or more put	plicly supported organ describes the type of	nizations	describe	d in sect	ion 509(a	a)(1) or se	ection 50	9(a)(2). S	ee <b>se</b>	ction
	a ⊠ Type I									gir i iii. tionally in	toarai	hod
е	• •		that the organization									
_	other than for	undation manage	ers and other than on	e or more	e publicly	support	ed organ	izations o	described	I in section	n 509	9(a)(1)
f	If the organiz	ation received	a written determination		the IRS 1	that it is	а Туре	I, Type	II, or Typ	e III sup	portir	ng
g	Since August		.    .   .   .   .   .  .  . he organization acce		gift or co	 ontributio	 n from a	 Iny of the	· · ·			X
	following pers		ndirontly controls sit	hau alaaa		L						
	(ii) A person (iii) below,	the governing b	ndirectly controls, eitody of the supported	ner alone organizat	or toget ion?	ner with	persons	describe	d in (ii) ai		Yes	No
			on described in (i) abo	-						11g(i)		X
			a person described in							11g(ii)	$\vdash$	X
h	Provide the fo	llowing informat	on about the support	ed organi	ization(s).					11g(iii)		
(i)	Name of supported	(ii) EIN	(iii) Type of organization		organization	r	ou notify	(vi)	s the	(vii) Amoun	t of mc	netary
	organization		(described on lines 1-9		sted in your	the organ	nzation in	organizat	ion in col		pport	o.u.y
			above or IRC section (see instructions))	governing	document?		of your port?		zed in the S?			
			(600	Yes	No	Yes	No	Yes	No			
A) <sup>T</sup>	he Associated Jewish											
	ommunity Fed Balto	52-0607957	9	X		X		X			90	0,500
B)												
C)						_						
D)						_						
E)									_			
otal												
vial		1	ı	I	l i			ł	I	l	90	0.500

0011000	, , , , , , , , , , , , , , , , , , , ,						rage 🕰
Part	Il Support Schedule for Organiza	ations Descr	ibed in Sect	ions 170(b)(1	)(A)(iv) and 1	70(b)(1)(A)(vi	)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify unde	r the tests lis	sted below, p	lease comple	te Part III.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and	[			[		
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the			i			
	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		** *** ** **		20 m		
5	The portion of total contributions by			21			
	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 Saati	Public support. Subtract line 5 from line 4.  on B. Total Support	<u>                                     </u>	* 1444.	113			
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(a) 2012	(f) Total
7	Amounts from line 4	(a) 2009	(b) 2010	(6) 2011	(d) 2012	<b>(e)</b> 2013	(i) Total
-	· · · · · · · · · · · · · · · · · · ·			-			
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
9	Net income from unrelated business				-		<del></del>
9	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						<del></del> -
	loss from the sale of capital assets						
	(Explain in Part IV.)						
11	Total support. Add lines 7 through 10	334 N				73.884	
12	Gross receipts from related activities, etc	<u> </u>				12	**
13	First five years. If the Form 990 is for the	he organization	's first, secon	d, third, fourth	, or fifth tax ye		n 501(c)(3)
	organization, check this box and stop he	ere					▶ 🗆
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line	6, column (f) di	vided by line 1	1, column (f))		14	%
15	Public support percentage from 2012 Sci	hedule A, Part	II, line 14 .			15	%
16a	331/3% support test-2013. If the organi						
	box and stop here. The organization qua	alifies as a publ	icly supported	organization			. ▶ 🗆
b	331/3% support test-2012. If the organ					15 is 331/3%	or more,
	check this box and stop here. The organ	nization qualifies	s as a publicly	supported org	ganization .		. 🕨 📋
17a	10%-facts-and-circumstances test -2						
	10% or more, and if the organization me						
	Part IV how the organization meets the "I			_	•	•	
	organization						. ▶ 🗆
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the organiza						
	Explain in Part IV how the organization m						
	supported organization						
18	Private foundation. If the organization di				•		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	11.
If the organization fails to qualify under the tests listed below, please complete Part II.)	•	

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(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						1
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 .		<u> </u>	<u> </u>			
b	Amounts included on lines 2 and 3						
	received from other than disqualified			1			
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	,	- 1	ł			
	line 6.)			<u> </u>			
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(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		ļ				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975			ł			
_						-	
	Add lines 10a and 10b		4				
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
40							
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,		<del>                                     </del>				
	and 12.)					i	
14	First five years. If the Form 990 is for the	e organization	l n'e firet eccen	d third fourth	or fifth toy ::	ar as a sastin	n 501/a\/2\
•-•	organization, check this box and <b>stop he</b> i	_			•		, , , ,
Section	on C. Computation of Public Suppor			· · · · ·	• • • • •		
15	Public support percentage for 2013 (line 8	<u>_</u>	<u> </u>	3 column (fi)		15	%
16	Public support percentage from 2012 Sch					16	<del></del>
	on D. Computation of Investment Inc	come Perce	ntage	· · · · ·	· · · · ·	1 10 1	
17	Investment income percentage for 2013 (I			v line 13 colur	nn (fl)	17	%
18	Investment income percentage from 2012			-	, , , ,	18	
19a	331/3% support tests—2013. If the organi	-	•			L	
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2012. If the organiz						
-	line 18 is not more than 331/3%, check this t	oox and stop h	nere. The organ	zation qualifies	as a publicly si	upported organ	zation >
20	Private foundation. If the organization die						
					Cab	adula A (Form 90)	

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

#### **Political Campaign and Lobbying Activities**

2013

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Yehuda & Anne Neuberger Foundation, Inc.  Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 or 1  Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures	Yes No
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 or 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures	Yes No Yes No
Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures	Yes No Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 . ▶ \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . ▶ \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made?	Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 .	Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 .	Yes No
Enter the amount of any excise tax incurred by the organization under section 4955	Yes No
Enter the amount of any excise tax incurred by the organization under section 4955	Yes No
Enter the amount of any excise tax incurred by organization managers under section 4955 .    If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .    Was a correction made? .    If "Yes," describe in Part IV.  Part I-C	Yes No
If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Was a correction made?  b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)  Enter the amount directly expended by the filing organization for section 527 exempt function activities  Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provided to the property of the page 12 organization's filing organization's filing organization's	Yes No
Was a correction made?  b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provided to the property of	Yes No
b If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(d)  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	c)(3).
Enter the amount directly expended by the filing organization for section 527 exempt function activities	
Enter the amount directly expended by the filing organization for section 527 exempt function activities	
activities	
Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	
527 exempt function activities	
Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	·
line 17b	
Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organization organization made payments. For each organization listed, enter the amount paid from the filing organization amount of political contributions received that were promptly and directly delivered to a separate political action committee (PAC). If additional space is needed, providing Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organization granization made payments. For each organization listed, enter the amount paid from the filing organization the amount of political contributions received that were promptly and directly delivered to a separate political action committee (PAC). If additional space is needed, providing Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's	
organization made payments. For each organization listed, enter the amount paid from the filing organization the amount of political contributions received that were promptly and directly delivered to a separate political action committee (PAC). If additional space is needed, provided in the provided	Yes No
organization made payments. For each organization listed, enter the amount paid from the filing organization the amount of political contributions received that were promptly and directly delivered to a separate political action committee (PAC). If additional space is needed, provided in the provided	ations to which the filing
as a separate segregated fund or a political action committee (PAC). If additional space is needed, provid  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's	ation's funds. Also enter
(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's	
filing organization's	de information in Part IV.
filing organization's	(e) Amount of political
funds If none, enter -0	contributions received and
	promptly and directly delivered to a separate
	political organization If
	none, enter -0-
(1)	
(2)	
(3)	
(4)	
(5)	
	<del></del>
(6)	

f Grassroots lobbying expenditures

Part	II-A Complete if the organiza	tion is exempt	under section 50	1(c)(3) and file	d Form 5768 (elec	tion under
•	section 501(h)).	halanan ta an a	######################################	disting Death W.		
A	heck ► ☐ if the filing organization name, address, EIN, ex	Delongs to an a	aπiliated group (and	d list in Part IV ( ving expenditur	each affiliated groi	up member's
вС	theck ▶ ☐ if the filing organization					
		obbying Expendi		or provisions a	(a) Filing	(b) Affiliated
	(The term "expenditures"				organization's totals	group totals
1a	Total lobbying expenditures to influei	nce public opinio	n (grass roots lobby)	na)	59,999	
b	Total lobbying expenditures to influer	•		•	11,111	
С	Total lobbying expenditures (add line	s 1a and 1b) .			59,999	
d	Other exempt purpose expenditures				250,120	<u>-</u>
е	Total exempt purpose expenditures (	add lines 1c and	1d)		310,119	
f	Lobbying nontaxable amount. Ent	er the amount	from the following	table in both		
	columns.				62,024	
	If the amount on line 1e, column (a) or (b	) is: The lobbying	g nontaxable amount	is:		* , "
	Not over \$500,000	20% of the a	mount on line 1e.			· 45 %
	Over \$500,000 but not over \$1,000,000		is 15% of the excess o			
	Over \$1,000,000 but not over \$1,500,000		is 10% of the excess o	ver \$1,000,000.	· 3 - 3 - 1 - 1 - 1	\$ ^ \$ '* '
	Over \$1,500,000 but not over \$17,000,000	<del></del>	is 5% of the excess over	er \$1,500,000.		1.47.4
	Over \$17,000,000	\$1,000,000.			** **	
g	Grassroots nontaxable amount (enter	•			15,506	
h :	Subtract line 1g from line 1a. If zero of				44,493	
 	Subtract line 1f from line 1c. If zero of there is an amount other than zero.	•			flo Form 4720	
J	reporting section 4911 tax for this ye	_	······	•		Yes 🗓 No
	(Some organizations that	made a section	Period Under Sect 501(h) election do r uctions for lines 2a	not have to com		
	Lobby	ing Expenditure	s During 4-Year Ave	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	( <b>b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount			75,000	59,999	134,999
b	Lobbying ceiling amount (150% of line 2a, column (e))					202,499
	Total lobbying expenditures			75,000	59,999	134,999
d	Grassroots nontaxable amount			18,750	15,506	34,256
е	Grassroots ceiling amount (150% of line 2d, column (e))				1	51,384

Schedule C (Form 990 or 990-EZ) 2013

59,999

75,000

51,384

134,999

Dout H. D	Complete if the experiencian is suggested and a second an
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

For a	each "Vos." response to lines to through the below provide in Port IV a detailed	(6	a)	(b)
desci	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Salar Company	*) ** *** ***	
а	Volunteers?			- C
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?	<u> </u>		
C				
d e	Mailings to members, legislators, or the public?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i	1. 1. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	X	
<b>2</b> a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			Mar.
b	If "Yes," enter the amount of any tax incurred under section 4912		11.00	i
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		**********	<b>30</b> 00 100 100
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	)(5), d	or se	ction
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."			
1 2	Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of	1	
а	Current year		2a	•
b	Carryover from last year	•	2b	
c	Total	•	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	•	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		3	
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby			
	and political expenditure next year?		4	1
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Par				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro I-B, line 1. Also, complete this part for any additional information.	up lis	t); Pai	rt II-A, line 2; and
			•••••	
	·		•••••	
•				

#### SCHEDULE D (Form 990)

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.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

Open to Public Inspection

vame c	or the organization	Employer identification number
Yehud	da & Anne Neuberger Foundation, Inc.	27-1040796
	Organizations Maintaining Donor Advised Funds or Other Similar F	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(b) t discount discounts
	· · · · · · · · · · · · · · · · · · ·	
2	Aggregate contributions to (during year) .	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets	
	funds are the organization's property, subject to the organization's exclusive legal cor	ee <b>e</b>
6	Did the organization inform all grantees, donors, and donor advisors in writing that g	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or	
	conferring impermissible private benefit?	· · · · · · · 🗌 Yes 🗒 No
Par	t 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
		of a certified historic structure
	Preservation of open space	i or a certified historic structure
2		sting in the form of a consequent
2	Complete lines 2a through 2d if the organization held a qualified conservation contribu	
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	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 no	ot on a
	historic structure listed in the National Register	· · ·   2d
3	Number of conservation easements modified, transferred, released, extinguished, or to	erminated 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, i	nspection, handling of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	
-	h	on susements during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea	esements during the year
•	S	asements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	s of section 170/b)(4)/P)
Ū	(i) and section 170(h)(4)(B)(ii)?	
^		
9	In Part XIII, describe how the organization reports conservation easements in its reven	
	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	,	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in	
	works of art, historical treasures, or other similar assets held for public exhibition,	
	public service, provide, in Part XIII, the text of the footnote to its financial statements t	hat describes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in it	ts 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	<b>▶</b> \$
	(i) Revenues included in Form 990, Part VIII, line 1	• •
2	If the organization received or held works of art, historical treasures, or other simi	lar assets for financial gain, provide the
-	following amounts required to be reported under SFAS 116 (ASC 958) relating to these	
_		
a	Revenues included in Form 990, Part VIII, line 1	· · · · · • • • • • • • • • • • • • • •
_ b	Assets included in Form 990, Part X	🟲 💲

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that apply):  a		Organizations Maintaining									
b   Scholarly research   C   Other	3		accession, and ot	her reco	ds, chec	k any of th	e follov	ving that are	a sigr	nificant	use of its
Presentation of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Purify 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?    Part IV	а	☐ Public exhibition		d							
Presentation of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Purify 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?    Part IV	b			е	Other	, 					
XIII.  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?											
Secrow 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   Sethe organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Yes   No   If "Yes," explain the arrangement in Part XIII and complete the following table:    Complete if the organization and part in Part XIII and complete the following table:   Complete if the organization include an amount on Form 990, Part X, line 21?   India	4		ion's collections a	and expla	un how t	ney further	the org	ganization's ex	kemp	t purpo	se in Part
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is its be organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5									☐ Ye	s 🗌 No
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?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  C Beginning balance  C Beginning balance  Distributions during the year  Distributions during the ye	Part				_						
included on Form 990, Part X?    Yes   No   Was   Was   No   Was   No	_	990, Part X, line 21.								ınt on	Form
C Beginning balance	1a	included on Form 990, Part X?								□ Ye	es 🗌 No
d Additions during the year	b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:					
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217.							ļ		Amo	ount	
Ending balance   1	C						<del> </del>				
f Ending balance   1f	d							<del></del>			
Did the organization include an amount on Form 990, Part X, line 21?    If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.	е	·									
Part V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Contributions	f										
Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered (Yes" to Form 990, Part IV, line 10.    Beginning of year balance											
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    a   Current year   (b) Pror year   (c) Two years back   (d) Three years back   (e) Four years back     b   Contributions			art XIII. Check here	e if the ex	cplanation	n has been	provide	ed in Part XIII	<u>· ·</u>	• •	니
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (d) Three years back   (e) Four years back   (d) Three years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years   (	Par		anamarad (Was)		- 000 11		40				
Beginning of year balance		Complete ii the organization					_	(d) Three years h	nook	(a) Faur	woom book
b Contributions c Net investment earnings, gains, and losses .  d Grants or scholarships . e Other expenditures for facilities and programs . f Administrative expenses . g End of year balance .  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(i)   b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describion of property (a) Cost or other basis (c) Accumulated depreciation  1a Land . (d) Book value (investment) (c) ther)  b Buildings . (e) Accumulated depreciation  1a Land . (e) Equipment . (e) Cost or other basis (c) Accumulated depreciation  1b Buildings . (e) Leasehold improvements . (e) Equipment . (e) Accumulated depreciation depreciation depreciation depreciation depreciation . (e) Book value of the content of the content improvements . (e) Accumulated depreciation depreciation depreciation depreciation . (e) Book value of the content of the	4-	Basissias of year balance	(a) Current year	(0) -11	oi yeai	(c) Two year	S Dack	(u) Tillee years t	Jack	(e) Four	years back
C Net investment earnings, gains, and losses	_	·						<u>.</u> .			
d Grants or scholarships		<b>_</b>									<del></del> .
e Other expenditures for facilities and programs	C	losses									<del>_</del>
f Administrative expenses	d	· · · · · · · · · · · · · · · · · · ·									
f Administrative expenses	е										
g End of year balance		· -								_	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations . 3a(ii)    (ii) related organizations . 3a(ii)    b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . 3b    Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation (d) Book value depreciation (d) Book value depreciation (d) Book value (e) Cacumulated (d) Book value (e) Cacumulated (e) Cacumulated (e) Cacumulated (e) Book value (e) Cacumulated (e) Book value (e) Cacumulated (e) Book value (e) Cacumulated (e) Cacumulated (e) Book value (e) Cacumulated (e) Book value (e) Cacumulated (e) Cacumulated (e) Cacumulated (e) Book value (e) Cacumulated (e) Cacumulat	f										
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	g	· · · · · · · · · · · · · · · · · · ·									
b Permanent endowment  %  c Temporarily restricted endowment  %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	2				e (line 1g	, column (a	)) held	as:			
Temporarily restricted endowment ► % 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			nt <b>&gt;</b>	%							
The percentages in lines 2a, 2b, and 2c should equal 100%.  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  (iii) related organizations  (iii) related organizations  (iv) unrelated organizations  (iv) related organizations  (iv) unrelated organizations  (iv) sad(ii)  (iv) unrelated organizations  (iv) sad(ii)  (iv) unrelated organizations  (iv) sad(ii)  (i			%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	С			.004							
organization by:  (i) unrelated organizations	0-	•	•			st are bold		maintained for	. 46.0		
(ii) unrelated organizations	Sa		possession or in	ie organii	zauon me	at are rieiu	anu au	ministered for	uie	r	V N-
(ii) related organizations		· ·								-	Tes No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (other)  (d) Book value  tall Land  b Buildings  c Leasehold improvements  d Equipment  e Other  Other						• • • •			•	<del>\ ''\</del>	
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (investment) (other) (other) (c) Accumulated depreciation (d) Book value (c) Accumulated (d) Book value (c) Accumulated (d) Book value (c) Accumulated (d) Book value	<b>L</b>	• •							•		
Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value	<i>A</i>	` · · ·		•					•	[ 3D ]	
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Equipment  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value	Par			on 3 ende	Willelit						
Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value	I all			" to For	n 990 P	art IV line	11a 9	See Form 99	Λ Ps	nrt Y li	ne 10
fa         Land         (other)         depreciation           b         Buildings         (other)         depreciation           c         Leasehold improvements         (other)         depreciation           d         Equipment         (other)         depreciation					F .				T		
b Buildings		beschiption of property								(u, 200	K 44.00
b Buildings	12	Land							<del>                                     </del>		
c Leasehold improvements						-			<del>                                     </del>		
d Equipment		_						<del>-</del>	$\vdash$		
e Other	_	•							1		<del>-</del>
											_
				90, Part	K, column	(B), line 10	)(c).)	•	1		

Part VII	Investments - Other Securities			<del> </del>	
	Complete if the organization ans	wered "Yes" to Fo	orm 990, Part IV, line	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	′	(b) Book value	(c) Me	thod of valuation d-of-year market value
(1) Financial			,		
	neld equity interests				
(3) Other					
	Γ Bank - Consolidated Investments			End-of-year mark	
(C) Invest	ment in Limited Partnership		487,860	End-of-year mark	ket value
(D)					
(E)					
(F)		**			
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.)		548 252		
Part VIII	Investments – Program Related	d.	310,232	NA 88 68 5 1 18 78	887. 147.48.4. 2.4.44.
	Complete if the organization answ		orm 990. Part IV. line	e 11c. See Form	990. Part X. line 13
	(a) Description of investment		(b) Book value		thod of valuation
			, ,		d-of-year market value
(1)					10
(2)					1.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	b) must equal Form 990, Part X, col (B) line 13.)	<del></del>		88.42 · 82. X86. 200.	
Part IX	Other Assets.		_ <del></del>	<b>11</b> .	
art ix	Complete if the organization answ	wered "Yes" to Fo	orm 990 Part IV line	11d See Form	990 Part Y line 15
-		a) Description	siii ooo, r are iv, iiric	7 114. 000 1 01111	(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·		<del>.</del>	
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(3)				1	
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(8)	<del></del>				
(9)	man (h) muset a surel Farm 2000 Part V	-1 (D) (' 45)			
Part X	mn (b) must equal Form 990, Part X, co	oi. (B) line 15.)	· · · · · · · ·	<u> ▶</u>	
raitA	Other Liabilities. Complete if the organization answ	wered "Yes" to Fo	orm 990, Part IV, line	e 11e or 11f. See	Form 990, Part X,
1.	line 25.		19. E	7% V 27 35 35 36 3%	2.000.
(1) Federal in	(a) Description of liability	(b) Book value	<u>'</u>		
(2)	icome taxes	<u>-</u>			
(3)					
(4)					*
(5)		·	· · · · · · · · · · · · · · · · · · ·	à	
(6)					
(7)				• 4	
(8)					
(9)					
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 25.)				
2. Liability for	r uncertain tax positions. In Part XIII, provi	de the text of the foo	tnote to the organization	n's financial stateme	ents that reports the
organization'	s liability for uncertain tax positions under	FIN 48 (ASC 740). C	heck here if the text of the	ne footnote has bee	n provided in Part XIII

Part			er Return.	
	Complete if the organization answered "Yes" to Form 99	0, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statement	nts	. 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants	. 2c		
d	Other (Describe in Part XIII.)	. 2d		
е	Add lines 2a through 2d		.   2e	
3	Subtract line 2e from line 1		. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b .			
b	Other (Describe in Part XIII.)	4b		
	Add lines <b>4a</b> and <b>4b</b>		. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, I			
Part			per Return.	
	Complete if the organization answered "Yes" to Form 99	0, Part IV, line 12a.		
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:		* * *	
а	Donated services and use of facilities	. 2a	. P	
b	Prior year adjustments		, ,	
С	Other losses	. 2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		. 2e	
3	Subtract line 2e from line 1		. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	]		
а	Investment expenses not included on Form 990, Part VIII, line 7b .			
b	Other (Describe in Part XIII.)			
	Add lines <b>4a</b> and <b>4b</b>		. 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I	, line 18.)	. 5	
Part				
Provid	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, lır	ıe
z; Pan	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p	eart to provide any additiona	al information.	
•				
	***************************************			
			•••••	
			***************************************	

**SCHEDULE 1** (Form 990)

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2013

OMB No. 1545-0047

Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

ehnd	ehuda & Anne Neuberger Foundation, Inc.	27-1040796
Part	Part I General Information on Grants and Assistance	
-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	sistance, and
	the selection criteria used to award the grants or assistance?	NO XARS
8	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	2 2 3
art	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990.	n 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.	

;	COLLEGE MILET	. 13		4 4 4		Mothad of univities		
-	(a) Name and address of organization     or government	NIII (a)	if applicable	(a) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Đ	Attachment #1							
(8)								
ව								
€								
(2)								
9								
<b>E</b>								
<b>®</b>								
6								
(10)								
(11)								
(12)								
0 B	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov ganizations listed	ernment organizat I in the line 1 table	tions listed in the lir	ne 1 table			13 0

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

Schedule ! (Form 990) (2013)

Schedule I (F	Schedule I (Form 990) (2013)
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					
2					
8					
4					
5					
9					
		-			
Factor Supplemental Information. Provide the Information	the information r	equired in Part I, lin	e 2, Part III, columr	required in Part I, line 2, Part III, column (b), and any other additional information.	onal information.
Grants are reviewed to ensure that they are permissible and in accord wi	e and in accord wit	ith applicable laws and regulations.	regulations.		
The Foundation will request and receive periodic reports and updates from the grantees regarding how grants are utilized,	orts and updates fro	m the grantees regard	ing how grants are ut	ilized,	
and takes such information into account in considering future grant awards.	g future grant awar	ds.			
					Schedule I (Form 990) (2013)

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

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

OMB No 1545-0047 2013

Compensated Employees, and riignest

Compensated Employees

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

Attach to Form 990. ► See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

**Employer identification number** 

Yehuo	la & Anne Neuberger Foundation, Inc. 27-1040796			
Part				
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	*		3
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use	Ì		l
	☐ Travel for companions ☐ Payments for business use of personal residence	'		**
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees		*	١,
	☐ 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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
			,	, 3 <sup>1</sup>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.	. ,	## APV 10	
	☐ Compensation committee ☐ Written employment contract	(		*
	☐ Independent compensation consultant ☐ Compensation survey or study	~		
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee	٠ ا		,
			14.5	, .
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:	at .		ý n
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	1	10.3	
	,	3 , 1		:
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	2	7	, ,
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		¥ - %	
	compensation contingent on the revenues of:			
а	The organization?	5a	<u>X</u> X_&	X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	\$ 735	355.3	1.55
		\$ . 1. by		. 55 
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:			<b>郡</b> 类。"
а	The organization?	6-		77, 7
b		6a		X
D		6b	1 \$0 15 to	X
	if tes to line oa or ob, describe in Part III.			***
7	For manager listed in Form 000 Part VIII Coation A line do did the association of the		<i>7</i> 78,8 }	, ,
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III			
_		7	-	X
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	8		X
_			*******	· ·
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	ו חו	I	

Schedule J (Form 990) 2013

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

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

Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990. Part VII. Section A line 1a applicable column (D) and (E) am

(A) Name and Title (i) Hasse compensation (ii) (ii) (ii) (ii) (ii) (ii) (ii) (ii	(B) Breakdown of W-2 and/or 1099-MIS  (i) Base (ii) Bonus & incentive compensation compensation  465,031 75,000	(iii) Other reportable compensation 94,852	(C) Retirement and other deferred compensation 59,313	(D) Nontaxable benefits	(E) Total of columns (B)(i)—(D)	(F) Compensation reported as deferred in prior Form 990
Marc B. Terrill (i) (ii) 465,031 (ii) (ii) (ii) (ii) (ii) (ii) (ii) (ii	(i) Base (ii) Bonus & I compensation compens	(iii) Oth reportat	other deferred compensation 59,313	benefits 23,216	(a)(h)(b)	(F) Compensation reported as deferred in prior Form 990
Marc B. Terrill (ii) (iii) (ii			59,313	23,216		
Marc B. Terrill (ii) (ii) (iii) (iii			59,313	23,216		
					717,412	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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Schedule J (Form 990) 2013

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	Part III	
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Part VI, Section B, Line 15, a new 5-year contract was executed beginning January 1, 2013. The terms and conditions of the deferred compensation plan are outlined in the contract with The Associated.

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

#### Supplemental Information to Form 990 or 990-EZ

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

Inspection

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer Identification number

Yehuda & Anne Neuberger Foundation, Inc. 27-1040796 Form 990 Part VI, Section A, Line 2 - There are family relationships among the Donor Members and Directors. Yehuda Neuberger and Anne Neuberger have a family relationship. Line 6 - The organization has two members, a Public Member- The Associated: Jewish Community Federation of Baltimore, Inc. and Donor Members consisting of Yehuda Neuberger and Anne Neuberger. Line 7a - The members appoint the Board of Directors. The Public Member appoints the majority and the Donor Members appoint the remainder. Line 7b - Amendments to the Bylaws are subject to change or rescission by the Members before they are adopted. Line 11a - The Form 990 and supporting schedules are distributed to the officers and directors upon completion for review prior to filing. Form 990 Part VI, Section B, Line 12c - The supported organization monitors and enforces the potential of any conflict of interests by regularly reviewing the Board of Directors, its actions and the investment of assets to ensure that no interested persons has a direct or indirect financial interest. Line 19 - The organization makes its governing documents and financial statements available to the public upon request. Filings made to the Internal Revenue Service relating to Form 990 and related schedules can also be found on www.guidestar.org. Form 990 Part IX, Line 24a All other expenses, Bank fees - \$32 Other investment expense - \$1

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Part

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer Identification number Inspection

(f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. 52-1899221 (e) End-of-year assets (d) Total income Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (c)
Legal domicile (state
or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity The Bancroft Foundation, Inc. Name of the organization

(9)

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Part II

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	12(b)(13) 3)led 3/7
						Yes	% N
(1) The Associated: Jewish Community Federation of Baltimore, Inc. 101 W. My. Royal Avenue Baltimore, MD 21201	Exempt Organization	MD	501(c)(3)	4	N/A		×
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
For Paperwork Reduction Act Notice, see the instructions for Form 990.	.00				Schedule R (Form 990) 2013	Form 99(	0) 2013

(i) Section 512(b)(13) controlled entity? Percentage ownership ŝ Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Yes managing partner? ĝ General or (h) Percentage Yes ownership amount in box 20 of Schedule K-1 Code V-UBI and-of-year assets (Form 1065) (g) Share of (h) Disproportionate ŝ allocations? (f) Share of total Yes income (g) Share of end-ofyear assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (state or foreign country) (c) Legal domicile (d)
Direct controlling
entity (b) Primary activity (c) Legal domicile (state or foreign country) Primary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization (1) N/A Part IV (1) N/A Part III 8 ල € 3 9 E 8 9 3 9 8 €

Schedule R (Form 990) 2013

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Schedule R (Form 990) 2013

Part V Transacti

					(9)
					(4)
					(6)
					(2)
					(1)
				iype (a~s)	
olved	ount inv	(d) Method of determining amount involved	(c) Amount involved	(b) Transaction	(a) Name of related organization
olds.	hresho	ships and transaction t	uding covered relations	omplete this line, incl	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.
××				· · · · · · · · · · · · · · · · · · ·	<ul> <li>Uther transfer of cash or property to related organization(s)</li> <li>Other transfer of cash or property from related organization(s)</li> </ul>
,	<u></u>				
< ×	2 0				d Reimbursement paid by related organization(s) for expenses
3 .	1				
*	X				o Sharing of paid employees with related organization(s)
×	_	1			
< >	_   _   E			·	<ul> <li>Performance of services of membership or fundraising solicitations for related organization(s)</li> <li>Performance of services or membership or fundraising solicitations by related organization(s)</li> </ul>
<b>d</b> ;	<u>.</u>	-   ` · ·			
>	_	71			k Lease of facilities equipment or other assets from related organization(s)
×	j				j Lease of facilities, equipment, or other assets to related organization(s)
×	=				i Exchange of assets with related organization(s)
×	ے				
×	5	19			g Sale of assets to related organization(s)
×	=				f Dividends from related organization(s)
-	_	<u> </u>			
×	1e				e Loans or loan guarantees by related organization(s)
×	p.				<b>d</b> Loans or loan guarantees to or for related organization(s)
×	5				c Gift, grant, or capital contribution from related organization(s)
	1b X				<b>b</b> Gift, grant, or capital contribution to related organization(s)
×	1a				a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
	3/5		nizations listed in Parts	or more related orga	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?
No	Yes				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Part VI

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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.

	94111-44101111		Chick Bill bill					-		
(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant	(e) Are all partners			(h) Disproportionate	(i) Code V—UBI		(k) Percentage
		(state or foreign country)		section 501(c)(3) organizations?	total income	end-of-year assets	allocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ownership
			sections 512-514)	Yes No			Yes No		Yes No	
(1)										
(2)										
(3)										
(4)										
(5)										
(9)										
(2)										
(8)		-								
(6)		:								
(10)										
(11)										
(12)										
(13)										
(14)			_							
(15)										
(16)										

Schedule R (Form 990) 2013

#### Attachment #1

# Yehuda & Anne Neuberger Foundation, Inc. TIN - 27-1040796 Schedule I, Part II December 31, 2013

		(c) IRC		(h)Purpose of
(a)Name and address of organization	(b)EIN #	section	(d)Amount	grant
Ahavas Yisrael Charity Fund	52-1219478	501 (c)(3)	7,100	General support
6400 Cross Country Boulevard Baltimore, MD 21215 American Israel Public Affairs Committee 251 H Street NW Washington, DC 20001	54-1060924	501 (c)(3)	59,999	General support
Bnai Jacob Shaarei Zion Congregation 6602 Park Heights Avenue Baltimore, MD 21215	52-0618349	501 (c)(3)	5,000	General support
Computer Sciences for the Blind, Inc. 2132 84th Street Brooklyn, NY 11214	11-3430665	501 (c)(3)	14,000	General support
Foundation for the Defense of Democracies, Inc. 1726 M Street, NW, #700 Washington, DC 20036	13-4174402	501 (c)(3)	7,000	General support
Ner Israel Rabbinical College 400 Mount Wilson Lane Pikesville, MD 21208	52-0660881	501 (c)(3)	5,000	General support
Ohr Chadash Academy 5700 Park Heights Avenue Baltimore, MD 21215	45-2187170	501 (c)(3)	7,200	General support
Renewal of Life Inc. 5904 13 Avenue Brooklyn, NY 11219	90-0772896	501 (c)(3)	5,000	General support
Suburban Orthodox Congregation 7504 Seven Mile Lane Baltımore, MD 21208	52-1012261	501 (c)(3)	5,500	General support
The Associated: JCFB 101 W. Mt. Royal Avenue Baltımore, MD 21201	52-0607957	501 (c)(3)	90,500	General support
The Women's Network for Single Parents 224 Avenue J Brooklyn, NY 11230	20-5555166	501 (c)(3)	30,000	General support
Union of Orthodox Congregations of America 11 Broadway New York, NY 10004	13-5623717	501 (c)(3)	6,000	General support
Yeshiva University 500 W 185th Street New York, NY 10033	13-1624225	501 (c)(3)	14,500	General support