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Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

| 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.

Inspection

<u> </u>	For t	ne 2013 calendar year, or tax year beginning ${ m SEP}  1$ , $ 2013$ and ending	a AUG 31, 2014	
В	Check applica	C Name of organization	D Employer identifi	cation number
	Add char	ress JEWISH FEDERATION OF SIOUX CITY, IOWA		
	Nam char	ge Doing Business As	42-0	698205
	Initia retui Tern ated	n Number and street (or P O box if mail is not delivered to street address) Room/s		r 258-0618
		nded Otto	G Gross receipts \$	1,152,976.
	App	BIOUR CITT, IR STITUT	H(a) is this a group re	
	pend	F Name and address of principal officer RAND1 BERGEN	for subordinates	ρ Yes X No
_		815 - 38TH STREET, SIOUX CITY, IA 51104	H(b) Are all subordinates in	
		xempt status: X 501(c)(3) 501(c) ( ) (Insert no ) 4947(a)(1) or 1		list. (see instructions)
		ite: N/A	H(c) Group exemptio	
	art I		Year of formation 1949 N	A State of legal domicile. 1A
_	1	<u></u>	TE SOCIAL WEL	FARE IN THE
Activities & Governance	'	SIOUXLAND AREA.	TE BOOTIES WEE	THE IN THE
Ē	2	Check this box I if the organization discontinued its operations or disposed of i	more than 25% of its net as	ssets
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
es &	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	0
Σ	6	Total number of volunteers (estimate if necessary)	6	0
cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	<6,378.>
_		Net unrelated business taxable income from Form 990·T, line 34	7b	0.
ine			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	225,610.	135,323.
Revenue	9	Program service revenue (Part VIII, line 2g)	11,576.	10,320.
Ŗ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	38,575.	77,488.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<3,226.	
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	272,535.	216,753.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
"	14	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	80,469.	82,502.
Ses	162	Professional fundraising fees (Part IX, column (A), line 11e)	00,403.	0.
Expenses	h	Total fundraising expenses (Part IX, column (A), line 25)		· · · · · · · · · · · · · · · · · · ·
<sub>)</sub> ထိ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	75,444.	78,153.
Ď	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	155,913.	160,655.
2	19	Revenue less expenses. Subtract line 18 from line 12	116,622.	56,098.
Net Assets or Fund Balances	3		Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	1,866,965.	2,165,901.
t As	21	Total liabilities (Part X, line 26)	243.	56.
碧	22	Net assets or fund balances. Subtract line 21 from line 20	1,866,722.	2,165,845.
-	art II	A 9		
		alties of perjury, I declare that I have examined this return, including acco <del>mpanying sch</del> edules and st	,	y knowledge and belief, it is
true	, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer	parer has any knowledge	
		Signature of officer	Date	
Sig			ou. In I	11 14
Her	re	RANDY BERGEN, PRESIDENT July Type or print name and title	12/1	///7
			Date , Check	PTIN
Paid	ı	Print/Type preparer's name  LAWRENCE L DELPERDANG  Preparer's supplying the property of the pr	LIVI 1 ALIU IT	— booz46550
	parer	Firm's name DELPERDANG, SCHUH & CO., P.C.	Firm's EIN	42-1412604
	Only	Firm's address P.O. BOX 627	1 IIIII S LIN	
	,	SIOUX CITY, IA 51102-0627	Phone no 71	2-255-8081
May	y the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

	n 990 (2013) JEWISH FEDERATION OF SIOUX CITY, IOWA 42-0698205 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE JEWISH FEDERATION OF SIOUX CITY IS TO PROMOTE
	SOCIAL WELFARE IN THE SIOUXLAND AREA.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
•	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	14 566
40	(Code) (Expenses \$14,566 • including grants of \$) (Revenue \$10,320 • ) THE ORGANIZATION PROVIDES JEWISH EDUCATION TO THE JEWISH POPULATION OF
	THE GREATER SIOUX CITY AREA AND SURROUNDING COMMUNITIES.
	THE GREATER STOOK CITT AREA AND BORROUNDING COMMONTITIES:
4b	(Code ) (Expenses \$ 874 • (including grants of \$
	THE ORGANIZATION COORDINATES AND PROVIDES COMMUNITY RELATIONS THROUGH
	VARIOUS CULTURAL AND OTHER EVENTS.
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
‡d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 15,440.
	Form <b>990</b> (2013)

			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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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?			3.5
40	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
44	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, VII, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
<b>.</b>	Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			<del></del> -
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	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>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\overline{\mathbf{x}}$
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_ <u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
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		X
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			1
	Schedule J	23		x
24a				
	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		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ĭ	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
Ь	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		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	]	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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		_ X_
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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	1 !		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

38

42-0698205 Form 990 (2013) JEWISH FEDERATION OF SIOUX CITY, IOWA Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 5c c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 X a 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 **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a 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? 9ь Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter. 11a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O

b Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

14a

14b

X

13b

13c

JEWISH FEDERATION OF SIOUX CITY, IOWA 42-0698205 Form 990 (2013) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	ction A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O										
b	b Enter the number of voting members included in line 1a, above, who are independent 1b										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6	Х								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		X							
8.	. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \							
а	The governing body?	8a	Х								
ь	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	]	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b									
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	ın Schedule O how this was done	12c									
13	Did the organization have a written whistleblower policy?	13		X							
14	Did the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1								
а	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b		X							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		1								
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		1								
	exempt status with respect to such arrangements?	16b									
Sect	ion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vallab	le								
	for public inspection. Indicate how you made these available. Check all that apply										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cıal								
	statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion: 🕨									
	JEWISH FEDERATION OF SIOUX CITY - 712-255-8081										
	815 - 38TH ST SIOUX CITY IA, SIOUX CITY, IA 51104										

Form	aan	1201	31

### JEWISH FEDERATION OF SIOUX CITY, IOWA

42-0698205

Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organization in	nor any related	orga	aniza	ation	COL	mper	nsat	ed any current officer, of	director, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unte	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		Cer ar	T	irecto	or/trus	( <del>ee</del> )	from	from related	other
	(list any	Egg						the	organizations	compensation
	hours for related	o d	<u>8</u> .			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	Tage 1	l trus		88	mberl Lab		(44-2/1099-141130)		and related
	below	dual	togr		old	8 SC	<sub> </sub>			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Form			
(1) RANDY BERGEN	0.50									
PRESIDENT, JEWISH FEDERATION		X		X			L	0.	0.	0.
(2) MARY ELLEN SILVERBERG	0.50	Į						_	_	_
VICE PRESIDENT - EDUCATION		X	_	Х				0.	0.	0.
(3) MIKE POTASH	0.50				l					_
VICE PRESIDENT - FINANCE		X		X				0.	0.	0.
(4) LINDA KALIN	1.00			١				_		
SECRETARY		Х		X				0.	0.	0.
(5) DOLF IVENER	0.50						}	_		
VICE PRESIDENT - OPERATION		X		X	<u>_</u> .		<u> </u>	0.	0.	0.
(6) RUTH LEBOWICH	0.50									
VICE PRESIDENT-EVENTS	2 50	X	-	X	<u> </u>			0.	0.	0.
(7) BRENT ROSENTHAL	0.50			.,						
CHAIRMAN	0.50	X	<u> </u>	X			_	0.	0.	0.
(8) SARILYE ATLAS	0.50	.,		3,7						
PRESIDENT-CONGREGATION BETH SHALOM		Х		Х	ļ			0.	0.	0.
	<del> </del>	_	<del> </del>	├						
			-							
			i							
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				<u> </u>		-	ļ. <u>.                                   </u>			
	.1	1	Ь	Ц		Ь	Ц	L		

Form 990 (2013)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 135,323 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 135,323. h Total. Add lines 1a-1f Business Code 10,320. 10,320. 2 a TUITION 611600 Program Service Revenue f All other program service revenue 10,320. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 45,321. 45,321. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (I) Securities (II) Other 7 a Gross amount from sales of 968,390. assets other than inventory b Less: cost or other basis 936,223. and sales expenses 32,167. c Gain or (loss) 32,167. 32,167. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ \_\_\_\_\_ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue <6,378.> <6,378.> 11 a BREITBURN ENERGY PARTN 211110 d All other revenue <6,378.> e Total. Add lines 11a-11d 216,753. <6,378.> 77,488. 10,320. Total revenue See instructions

	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon-				
Do 7b	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,			•	
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	77,876.	5,724.	72,152.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,626.	238.	4,388.	
11	Fees for services (non-employees)				
а	Management				
b	Legal				·
С	F	7,341.		7,341.	·
d	, , , , , , , , , , , , , , , , , , ,		······································		
е	Professional fundraising services See Part IV, line 17				···
f	Investment management fees	-			
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion	2 427		2 427	
13	Office expenses	3,437.		3,437.	<del></del>
14	Information technology				
15	Royalties	25,130.		25,130.	<del></del>
16	Occupancy	23,130.		23,130.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings Interest				
20 21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization	16,676.		16,676.	<del></del>
23	Insurance	23,3,3,			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0 )				
а	EDUCATION & CULTURE	9,478.	9,478.		
ь	MISCELLANEOUS EXPENSES	9,267.		9,267.	
c	NEWSLETTER & PUBLICATIO	3,752.		3,752.	
d	REPAIRS	1,740.		1,740.	
_	All other expenses	1,332.		1,332.	
25	Total functional expenses Add lines 1 through 24e	160,655.	15,440.	145,215.	0.
26	Joint costs. Complete this line only if the organization			· · · · · · · · · · · · · · · · · · ·	
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here   ☐ if following SOP 98-2 (ASC 958-720)				

Part	X	Balance Sheet		<del></del>		
		Check if Schedule O contains a response or note to any	line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		117,787.	1	105,183
i	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4,388.	4	3,755
ļ	5	Loans and other receivables from current and former of	<del>'''                                    </del>			
		trustees, key employees, and highest compensated em	ployees Complete			
		Part II of Schedule L			5	
1	6	Loans and other receivables from other disqualified pers	sons (as defined under			
1		section 4958(f)(1)), persons described in section 4958(c	)(3)(B), and contributing			
		employers and sponsoring organizations of section 501	· · · · · · · · · · · · · · · · · · ·			
2		employees' beneficiary organizations (see instr) Comple			6	
Assets	7	Notes and loans receivable, net			7	
ž	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		4,236.	9	527
1	10a	Land, buildings, and equipment: cost or other				
		basis Complete Part VI of Schedule D 10a	590,116.			
	b	Less accumulated depreciation 10b	400,800.	205,992.	10c	189,316
1	11	Investments - publicly traded securities		11		
1	12	Investments - other securities. See Part IV, line 11		1,534,562.	12	1,867,120
1	13	Investments - program-related. See Part IV, line 11			13	
1	14	Intangible assets		14		
1	15	Other assets. See Part IV, line 11		15		
1	16	Total assets. Add lines 1 through 15 (must equal line 34	1,866,965.	16	2,165,901	
1	17	Accounts payable and accrued expenses	243.	17	56	
1	18	Grants payable		18		
1	19	Deferred revenue			19	
2	20	Tax-exempt bond liabilities			20	·
2	21	Escrow or custodial account liability. Complete Part IV o	f Schedule D		21	
ც   2	22	Loans and other payables to current and former officers	, directors, trustees,			
		key employees, highest compensated employees, and c	disqualified persons			
		Complete Part II of Schedule L			22	
<b>-</b>   2	23	Secured mortgages and notes payable to unrelated third	d parties		23	·
2	24	Unsecured notes and loans payable to unrelated third p	arties		24	
2	25	Other liabilities (including federal income tax, payables to				
		parties, and other liabilities not included on lines 17-24).	Complete Part X of		ŀ	
		Schedule D		0.4.0	25	
2	26	Total liabilities. Add lines 17 through 25		243.	26	56
		Organizations that follow SFAS 117 (ASC 958), check	here \ X and			
		complete lines 27 through 29, and lines 33 and 34.		1 066 700		2 165 045
2		Unrestricted net assets	_	1,866,722.	27	2,165,845
2		Temporarily restricted net assets			28	
2		Permanently restricted net assets	, , ,		29	
:		Organizations that do not follow SFAS 117 (ASC 958)	, check here			
		and complete lines 30 through 34.				
3		Capital stock or trust principal, or current funds	Ļ		30	
3		Paid in or capital surplus, or land, building, or equipment			31	
3 3		Retained earnings, endowment, accumulated income, or	r other funds	1 066 700	32	2 165 245
3		Total net assets or fund balances		1,866,722.	33	2,165,845
3	4	Total liabilities and net assets/fund balances		1,866,965.	34	2,165,901 Form <b>990</b> (2013

orr	m 990 (2013) JEWISH FEDERATION OF SIOUX CITY, IOWA	42-06	98205	Pa	<u>ge 12</u>
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>53.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			55.
3	Revenue less expenses. Subtract line 2 from line 1	3			98.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,86		
5	Net unrealized gains (losses) on investments	5	24	<u>3,0</u>	25.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
,	column (B))	10	2,16	5,8	<u>45.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
			<b>,</b>	Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	ļ
-	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a		-	٠,
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
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 audited on a separat	e basıs,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		_X_
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			ĺ
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ. Information about Schedule A (Form 990 or 990-EZ) and its instructions istatuw.rs.gov/form990

Inspection **Employer identification number** 

			<u>JEWISH</u>	FEDERATION C	OF SIC	<u>UX CI</u>	TY, I	OWA		4	<u>2-0698</u>	<u>205</u>	
P	art l	Reason	for Public Cha	rity Status (All organiz	zations mu	st complet	e this par	t ) See inst	ructions.				
The	organ	nization is not	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox)					
1		A church, co	onvention of church	es, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)					
2		A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E)								
3		A hospital or	r a cooperative hosp	oital service organization	described	ın <b>section</b>	170(b)(1)	(A)(iii).					
4		A medical re	search organization	operated in conjunction	with a hos	pital desci	rıbed ın <b>se</b>	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	e,
		city, and sta	te·										
5		An organizat	tion operated for the	e benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describ	ed in		
		section 170	)(b)(1)(A)(iv). (Comp	lete Part II.)									
6		A federal, sta	ate, or local governr	nent or governmental uni	t describe	d ın <b>sectio</b>	n 170(b)(	I)(A)(v).					
7	X	An organizat	on that normally re	ceives a substantial part	of its supp	ort from a	governme	ental unit c	r from the	general	public desc	ribed i	n
		section 170	(b)(1)(A)(vi). (Compl	ete Part II)									
8		A community	y trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		An organizat	ton that normally re	ceives. (1) more than 33	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	nd gross re	ceipts '	from
		activities rela	ated to its exempt fu	inctions - subject to certa	aın excepti	ons, and (2	2) no more	than 33-1	/3% of its	support	from gross	invest	ment
		income and	unrelated business	taxable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon	after June 3	30, 197	5.
		See section	509(a)(2). (Complet	e Part III.)									
10				perated exclusively to te									
11				perated exclusively for the									or
				ations described in secti				2). See <b>sec</b>	ction 509(	<b>a)(3).</b> Ch	eck the box	that	
		describes the	e type of supporting	organization and compl	ete lines 1	1e through	11h.						
	_	a Type				nctionally i					n-functional		•
е				at the organization is not									n
				than one or more publicl						9(a)(1) or	section 509	(a)(2).	
f		If the organiz	ation received a wr	tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
			rganization, check t		_								L
g	l			organization accepted ar									
				directly controls, either a	lone or tog	ether with	persons o	lescribed i	ın (II) and (	III) below	I	Yes	No
		•		supported organization?							11g(i)	$\vdash$	
			•	n described in (i) above?		•					11g(ii)		-
				a person described in (i)							11g(iii)	<u> </u>	
h		Provide the f	ollowing information	about the supported or	ganization	(s).							
			T		Viv.) In the c	rganization	(v) Did vo	. notify the	(vi) Is	the			
(i)		of supported	(II) EIN	(iii) Type of organization (described on lines 1-9		sted in your		ion in col	organization	on in col	(vii) Amoun		netary
	orga	inization		above or IRC section	, , ,	document?		r support?	(ı) organız U S	?	Sup	port	
				(see instructions))	Yes	No	Yes	No	Yes	No			
		-		<del> </del>	<del></del>	†					-		
		-											
					ļ	ļ		-	-	<del> </del>			
	-												
				1	1	į.	1	1	1	1			

Schedule A (Form 990 or 990-EZ) 2013 JEWISH FEDERATION OF SIOUX CITY, IOWA 42-06982<u>05</u> Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2009 (c) 2011 (d) 2012 (e) 2013 **(b)** 2010 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 817,344. 163,366. 132,309. 138,840. 237,186. 145,643. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 817,344. 163,366. 132,309. 138,840. 237,186. 145,643. 4 Total. Add lines 1 through 3 The portion of total contributions

by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 817,344. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2009 (b) 2010 Calendar year (or fiscal year beginning in) (d) 2012 (f) Total (c) 2011(e) 2013 163,366. 132,309. 138,840. 237,186. 145,643. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 817,344 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 100.00 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 100.00 15 15 Public support percentage from 2012 Schedule A, Part II, line 14 16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and  $\triangleright [X]$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule	A (Form	990 0	r 990-F7\	2015

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Section A. Public Support	iow, piease com	ipiele rail II )				
Calendar 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	(4) 2000	10/2010	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	1 10/2012	(0, 2010	in rotar
membership fees received. (Do not						
Include any "unusual grants ")						
2 Gross receipts from admissions,	<del></del>	<del> </del>			<del> </del>	
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513	<del></del>	ļ				
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities				ŀ		
furnished by a governmental unit to						
the organization without charge			<u> </u>			
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons					1	
<b>b</b> Amounts included on lines 2 and 3 received			li .			
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)	· · · · · · · · · · · · · · · · · · ·					
ection B. Total Support						
alendar 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						
Oa Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources			'			
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975					<b>(</b>	
c Add lines 10a and 10b			-			
Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
2 Other Income. Do not include gain			<del>-</del>			
or loss from the sale of capital						
assets (Explain in Part IV.)						· · · · · · · · · · · · · · · · · · ·
3 Total support. (Add lines 9, 10c, 11, and 12)		Supplement of the second states	d fourth or fifth 1	L	on F01/a\/2\ a====	otion
4 First five years. If the Form 990 is for the	ne organization's	s tirst, second, thir	a, tourth, or titth ta	ax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here	Support Do		<u> </u>		<del></del>	
ection C. Computation of Public			(A)		45	
5 Public support percentage for 2013 (line		-	Olumn (t))		15	
Public support percentage from 2012 Section D. Computation of Invest					16	
ection D. Computation of Invest			o 12 only on (6)		17	
7 Investment income percentage for 2013			e 13, column (f))		17	
Investment income percentage from 20					18	
9a 33 1/3% support tests - 2013. If the or	-					7 is not
more than 33 1/3%, check this box and	stop here. The					<b>▶</b> L_
<b>b 33 1/3% support tests - 2012.</b> If the or line 18 is not more than 33 1/3%, check	-					and . —

Part IV	
	Also complete this part for any additional information (See instructions)
-	
-	
··	
<del></del>	

### SCHEDULE D

· (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, 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

Open to Public Inspection

**Employer identification number** 

	JEWISH FEDERATION OF	F SIOUX CITY, IOWA	`	42-0698205	5
Pa	rt I Organizations Maintaining Donor Advised	<b>Funds or Other Similar Funds or</b>	Accour	its. Complete if the	
	organization answered "Yes" to Form 990, Part IV, line 6	l			
		(a) Donor advised funds	(b) Fund	s and other accounts	
1	Total number at end of year				
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	ting that the assets held in donor advised f	unds		
	are the organization's property, subject to the organization's ex	clusive legal control?		Yes	No
6	Did the organization inform all grantees, donors, and donor adv	isors in writing that grant funds can be use	d only		
	for charitable purposes and not for the benefit of the donor or o	lonor advisor, or for any other purpose con	ferring		_
<del></del>	impermissible private benefit?			Yes	No
Pa	TII Conservation Easements. Complete if the organ		IV, line 7		
1	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (e.g., recreation or edu				
	Protection of natural habitat	Preservation of a certified	historic st	ructure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form of a	conservat	ion easement on the I	last
	day of the tax year.		r		V
	<b>-</b>			leld at the End of the Ta	x year
a	Total number of conservation easements		2a	<del></del>	
b	Total acreage restricted by conservation easements	house an alread of the Col	2b		
С.	Number of conservation easements on a certified historic struct	• •	2c		
d	Number of conservation easements included in (c) acquired after	er 8/1//06, and not on a historic structure	2d		
3	listed in the National Register  Number of conservation easements modified, transferred, relea	sed extinguished or terminated by the ord	<del>-</del>	during the tax	
3	year	sed, extinguished, or terminated by the org	jarnzation	doning the tax	
4	Number of states where property subject to conservation easer	ment is located			
5	Does the organization have a written policy regarding the period				
	violations, and enforcement of the conservation easements it he			Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspecting, an		g the year	<b>&gt;</b>	
7	Amount of expenses incurred in monitoring, inspecting, and ent				_
8	Does each conservation easement reported on line 2(d) above s				
	and section 170(h)(4)(B)(ii)?			Yes	No
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expense sta	tement, ar	nd balance sheet, and	l
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes the	organizatio	on's accounting for	
	conservation easements.				
Par	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or Othe	r Simila	r Assets.	
	Complete if the organization answered "Yes" to Form 99		_		_
1a	If the organization elected, as permitted under SFAS 116 (ASC				
	historical treasures, or other similar assets held for public exhib	ition, education, or research in furtherance	of public s	service, provide, in Pai	rt XIII,
	the text of the footnote to its financial statements that describe				
b	If the organization elected, as permitted under SFAS 116 (ASC				
	treasures, or other similar assets held for public exhibition, educ	cation, or research in furtherance of public	service, pr	ovide the following an	nounts
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$		
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical treasi	-	ın, provide		
	the following amounts required to be reported under SFAS 116	(ASC 958) relating to these items:	<b>.</b> .		
	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$		
b	Assets included in Form 990, Part X		▶ \$		

	· · · · · · · · · · · · · · · · · · ·	FEDERATION				AWOI		<u>42-06</u>		
Pa	rt III   Organizations Maintaining (	Collections of A	rt, His	torical Tr	reasures,	or Oth	<u>er Simil</u>	<u>ar Asse</u>	<b>ts</b> (continu	ıed)
3	Using the organization's acquisition, access	ion, and other recor	ds, chec	k any of the	following that	at are a s	ignificant	use of its	collection	Items
	(check all that apply):									
а	Public exhibition	•	a 🔲	Loan or exc	change progr	ams				
ь	Scholarly research	•	e	Other	<del></del>					<del> </del>
c	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	ın how t	hey further t	the organizat	ion's exe	mpt purp	ose in Parl	t XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	asures, or oth	er sımıla	r assets		_	
	to be sold to raise funds rather than to be m	aintained as part of	the orga	anızatıon's c	ollection?				Yes	No
Pa	Escrow and Custodial Arran reported an amount on Form 990, Pa	-	ete if the	e organizatio	on answered	"Yes" to	Form 990	), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custoo		diary for	contribution	ns or other as	ssets no	included			
	on Form 990, Part X?		,						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowina	table:					_	
_	,,,	<b></b>							Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				<u>-</u>		Yes	□ No
	If "Yes," explain the arrangement in Part XIII			on has beer	provided in	Part XIII				
	TV Endowment Funds. Complete						10.			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs				1					
f	Administrative expenses									
g	End of year balance		i i							
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administe	ered for t	he organi	zation	_	
	by									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Sche	dule R?					3b	
4_	Describe in Part XIII the intended uses of the		owm <u>e</u> nt	funds.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" to Form 990	), Part I\	/, line 11a S	See Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or o	other	, , ,	t or other	1	ccumulate		(d) Book	value
		basis (investi	ment)	basis	(other)	de	preciation	·		
1a	Land .									
b	Buildings									
c	Leasehold improvements				35,002.		345,8		189	,135.
d	Equipment				8,184.		28,0			181.
e	Other			<u> </u>	<u> 26,930.</u>	<u> </u>	26,9	30.		0.
[otal	Add lines 1a through 1e. (Column (d) must e	equal Form 990. Part	X. colui	mn (B), line	10(c))			<b>&gt;</b>	189	316.

Schedule D (Form 990) 2013

Part X	Other Liabilities.	

1.	(a) Description of hability	(b) Dook value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		<u> </u>
Total. (	Column (b) must equal Form 990, Part X, col. (B) line 25 )	-

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

Sche	dule D (Form 990) 2013 JEWISH FEDERATION OF SIOU	CITY, IOWA	42-0698205 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue pe	er Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1	
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	_2b	
С	Recoveries of prior year grants	2c	
	Other (Describe in Part XIII)	_2d	
	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:	1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	Other (Describe in Part XIII.)	4b	<del> </del>
_	Add lines 4a and 4b		<u>4c</u>
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Par	Reconciliation of Expenses per Audited Financial Staten		per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	2a	<del> </del>
	Prior year adjustments	2b .	<del> </del>   ·
	Other losses	2c	<del> </del>
	Other (Describe in Part XIII.)	2d	—— a l
	Add lines 2a through 2d Subtract line 2e from line 1		2e 3
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		3
		4a	
	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	
	Add lines <b>4a</b> and <b>4b</b>	TU	4c
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
	t XIII Supplemental Information.		
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add		
<del></del>			

### **SCHEDULE O** ` (Form 990 or 990-ÉZ)

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule O (Form 990 or 990-FZ) and its instructions is a true in the form 990.

Inspection Employer identification number

JEWISH FEDERATION OF SIOUX CITY, IOWA	42-0698205
FORM 990, PART VI, SECTION A, LINE 6:	
EXPLANATION: THE ORGANIZATION CONSIDERS ANY INDIVIDUAL CON	TRIBUTING \$25 OR
MORE TO BE A MEMBER. ALL MEMBERS HAVE THE RIGHT TO BECOME	A DIRECTOR.
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: FORM 990 IS REVIEWED BY GOVERNING BOARD BEFOR	E IT IS FINALIZED
AND FILED WITH THE INTERNAL REVENUE SERVICE.	
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: COMPENSATION FOR THE SHARED WAGES FOR THE EXE	CUTIVE DIRECTOR
AND OTHER KEY EMPLOYEES IS DETERMINED BY THE BOARD OF DIRE	CTORS. THEY ALSO
PERFORM THE ANNUAL REVIEW RELATED TO THESE EMPLOYEES.	
FORM 990, PART VI, SECTION C, LINE 18:	
EXPLANATION: THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE	TO INDIVIDUALS
UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: NO DOCUMENTS AVAILABLE TO THE PUBLIC	
FORM 990, PART XII, LINE 2C:	
EXPLANATION: NO CHANGE	

(g) Section 512(b)(13) controlled Employer identification number 42-0698205ŝ Open to Public Inspection OMB No 1545-0047 2013 × entity? Direct controlling Yes 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. Direct controlling entity End-of-year assets status (if section Public charity 501(c)(3)) ▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. CHURCH ▶Information about Schedule R (Form 990) and its instructions is at ununurs gour form990. Total income Related Organizations and Unrelated Partnerships Exempt Code Ð section ▶ See separate instructions. 501(D) Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) IOWA IOWA SIOUX CITY ► Attach to Form 990. RELIGIOUS ORGANIZATION Primary activity Primary activity (JEWISH TEMPLE) JEWISH FEDERATION OF CONGREGATION BETH SHALOM - 42-1425453 Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity 51104 Name of the organization Department of the Treasury Internal Revenue Service 815 38TH STREET SIOUX CITY, IA SCHEDULE R (Form 990) Part # Parti

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

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 JEWISH FEDERATION OF SIOUX CITY, IOWA

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.

Part III

Page 2

42-0698205

	ည္		l			1			1		I		ı
S	General or Percentage managing ownership												
9	al or	ş				T		_	 T				1
9	sener nanag partn	es	Г			T	_		$\vdash$	 			 1
€	Code V-UBI amount in box a	1 (Form 1065)											
		1주				<u> </u>					 <u> </u>	 	 :
E	Disproportionate allocations?	Yes No		 							    -	 	
	ā	_		 		-			 ┢	 	├	 	 [
( <u>6</u>	Share of end-of-year	612662										•	L
€	Share of total income												
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)											44 3
Đ	Direct controlling entity				•								14 3
<u></u>	domicile (state or	country)											
(a)	Primary activity												o classic of the contract
(b)	Name, address, and EIN of related organization												On the objection of Debata Department of the profit of the

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 Part IV

	ے	tion 0(13)	ty?	Yes								
	اق ا	Section 512(b)(13) controlled	ent	Yes								
	3	- O	2									
		Share of										
	<b>(</b> )	Share of total	2									
	(e)	Type of entity	or trust)	,								
	(P)	Direct controlling	(min)									
	3	Legal domicile (state or	foreign	country)								
mig the tax year	(Q)	Primary activity										
organizations treated as a corporation of trast during the tax year	(a)	Name, address, and EIN of related organization										

Page 3

. . .

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ž
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?	is with one or more re	lated organizations listed	ın Parts II-IV?			-
a Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity				1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				16		×
c Giff, grant, or capital contribution from related organization(s)				1c		×
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)				-		×
f Dividends from related organization(s)				1		×
<ul><li>g Sale of assets to related organization(s)</li></ul>				19		×
h Purchase of assets from related organization(s)				£		×
i Exchange of assets with related organization(s)				:=		×
j Lease of facilities, equipment, or other assets to related organization(s)				Έ		×
k Lease of facilities, equipment, or other assets from related organization(s)				<del>-</del>		×
Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			5	×	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9	×	
p Reimbursement paid to related organization(s) for expenses				10	X	
				19		×
r Other transfer of cash or property to related organization(s)				=		×
s Other transfer of cash or property from related organization(s)				18		×
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.	who must complete th	is line, including covered	relationships and transaction thresholds.			
<b>(a)</b> Name of related organization	(b) Transaction	(c) Amount Involved	(d) Method of determining amount involved	olved		
	type (a-s)			}		
(1) CONGREGATION BETH SHALOM	0	77,876.	77,876.ALLOCATED COSTS			
(2)						
(3)						
(4)						
(5)						
(9)						
332163 09-12-13			Schedule R (Form 990) 2013	(Form	(066	2013

Page 4

Part 👫 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.

(k)  (k)  Percentage  and  ownership					
General or managing partner?	<u></u>	 <del>                                     </del>	 	<u> </u>	
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)					
Disproportonate allocations?		 			
(g) Share of end-of-year assets					
(f) Share of total income				•	
(e) Are all Are all 501(c)(3) 0195.7 4) Yes No					
(d) Predominant income pretated, unrelated, excluded from tax under section 512-514);					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

. . .

Schedule R	(Form 990) 2013	JEWISH	FEDERATION C	F SIOUX	CITY,	IOWA	42-0698205	Page 5
Part VII	Supplemental Infor	mation		-				
	Provide additional informa	ation for respon	ses to questions on Sch	edule R (see in	structions).			
			<del></del>					
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			<del></del>					

#### JEWISH FEDERATION OF SIOUX CITY, IOWA EIN: 42-0698205 8/31/2014

FORM 990 - PAGE 9, STATEMENT OF REVENUE: LINE 7a, 7b, 7c, & 7d

REALIZED GAIN/LOSSES SUMMARY SCHEDULE:

		5475	2475			
ACCOUNT	DESCRIPTION	DATE ACQUIRED	DATE SOLD	PROCEEDS	COST	GAIN
NCCOOM!	bescan flow	Acquires	3010	TROCEEDS		<u> </u>
BAIRD 6850-7528	VIRTUS EMERG MKT OPP C	VARIOUS	4/16/14	37,983.34	40,125.64	(2,142.30)
BAIRD 6850-7528	INVESCO BAL RSK ALLOC C	VARIOUS	4/16/14	76,639.83	79,368.52	(2,728.69)
BAIRD 6850-7528	JH STRAT INCM OPP C	VARIOUS	4/16/14	40,990.10	42,083.04	(1,092.94)
BAIRD 1180-1504	FT D/M EX US ALPHADX ETF	9/11/13	1/15/14	22,074.75	20,785.52	1,289.23
BAIRD 1180-1504	FT EUROPE ALPHADX ETF	9/11/13	1/15/14	6,716.62	5,945.55	771.07
BAIRD 1180-1504	FT UTD KNGDM ALPHADX ETF	9/11/13	1/15/14	23,137.97	20,918.34	2,219.63
BAIRD 1180-1504	FT CNSMR DSCR ALPHDX ETF	11/6/12	1/15/14	1,902.19	1,365.00	537.19
BAIRD 1180-1504	FT CNSMR STPL ALPHDX ETF	11/6/12	1/15/14	1,252.27	864.04	388.23
BAIRD 1180-1504	FT HLTHCR ALPHADX ETF	11/6/12	1/15/14	4,534.35	2,900.61	1,633.74
BAIRD 1180-1504	FT NYSE ARCA BIOTECH ETF	6/27/13	1/15/14	5,233.73	4,102.24	1,131.49
BAIRD 1180-1504	FT DJ INTERNET INDX ETF	VARIOUS	1/15/14	6,972.50	4,512.52	2,459.98
BAIRD 1180-1504	FT EUROPE ALPHADX ETF	9/11/13	2/21/14	9,337.26	8,079.85	1,257.41
BAIRD 1180-1504	FT SWITŻRLD ALPHADX ETF	1/15/14	2/21/14	9,072.07	8,941.08	130.99
BAIRD 1180-1504	FT GERMANY ALPHADX ETF	1/15/14	2/21/14	9,419.31	9,222.60	196.71
BAIRD 1180-1504	FT CANADA ALPHADX ETF	1/15/14	2/21//14	8,877.04	8,868.73	8.31
BAIRD 1180-1504	FT E/M SC ALPHADEX ETF	1/15/14	2/21//14	17,362.48	16,910.84	451.64
BAIRD 1180-1504	FT HLTHCR ALPHADX ETF	1/27/12	2/21//14	529.12	286.27	242.85
BAIRD 1180-1504	FT NYSE ARCA BIOTECH ETF	6/27/13	2/21//14	2,464.92	1,758.11	706.81
BAIRD 1180-1504	FT DJ INTERNET INDX ETF	6/28/11	2/21//14	636.43	356.06	280.37
BAIRD 1180-1504	FT EUROPE ALPHADX ETF	9/11/13	3/28//14	177.26	152.45	24.81
BAIRD 1180-1504	FT SWITZRLD ALPHADX ETF	1/15/14	3/28//14	427.49	415.87	11.62
BAIRD 1180-1504	FT CANADA ALPHADX ETF	1/15/14	3/28//14	358.19	354.75	3.44
BAIRD 1180-1504	FT CNSMR DSCR ALPHDX ETF	2/21/14	3/28//14	950.75	959.97	(9.22)
BAIRD 1180-1504	FT CNSMR STPL ALPHDX ETF	2/21/14	3/28//14	1,640.21	1,393.46	246.75
BAIRD 1180-1504	FT CNSMR STPL ALPHDX ETF	4/28/14	5/14/14	719.74	691.74	28.00
BAIRD 1180-1504	FT HLTHCR ALPHADX ETF	3/28/14	5/14/14	301.97	300.00	1.97
BAIRD 1180-1504	FT NYSE ARCA BIOTECH ETF	3/28/14	5/14/14	1,892.75	1,857.50	35.25
BAIRD 3122-3530	FT UTILS ALPHADX ETF	8/29/13	9/11/13	28,587.81	28,836.68	(248.87)
BAIRD 3122-3530	ISHS US TECH ETF	VARIOUS	10/24/13	35,103.68	33,286.75	1,816.93
BAIRD 3122-3530	FT CNSMR DSCR ALPHDX ETF	VARIOUS	12/11/13	4,518.56	4,239.86	278.70
BAIRD 3122-3530	FT ENERGY ALPHADX ETF	9/11/13	12/11/13	4,413.06	4,176.90	236.16
BAIRD 3122-3530	FT FINLS ALPHADX ETF	VARIOUS	12/11/13	4,729.27	4,418.24	311.03
BAIRD 3122-3530	FT HLTHCR ALPHADX ETF	VARIOUS	12/11/13	4,918.67	4,552.44	366.23
BAIRD 3122-3530	FT INDL PROD DUR A/D ETF	VARIOUS	12/11/13	5,390.32	4,920.16	470.16
BAIRD 3122-3530	FT MATRLS ALPHADX ETF	VARIOUS	12/11/13	4,550.80	4,278.20	272.60
BAIRD 3122-3530	FT TECH ALPHADX ETF	10/24/13	12/11/13	3,208.94	3,165.51	43.43
BAIRD 3122-3530	FT CONSMR DSCR ALPHDX ETF	8/29/13	1/29/14	30,323.75	28,563.47	1,760.28
BAIRD 3122-3530	FT CNSMR STPL ALPHDX ETF	12/11/13	1/29/14	30,313.13	31,610.77	(1,297.64)
BAIRD 3122-3530	FT ENERGY ALPHADX ETF	VARIOUS	2/5/14	40,741.25	40,035.22	706.03
BAIRD 3122-3530	FT FINLS ALPHADX ETF	1/29/14	2/26/14	7,355.68	7,172.90	182.78
BAIRD 3122-3530	FT HLTHCR ALPHADX ETF	VARIOUS	2/26/14	9,833.07	9,138.99	694.08
BAIRD 3122-3530	FT INDL PROD DUR A/D ETF	1/29/14	2/26/14	8,825.72	8,394.79	430.93
BAIRD 3122-3530	FT MATRLS ALPHADX ETF	1/29/14	2/26/14	9,190.52	8,667.17	523.35
BAIRD 3122-3530	FT TECH ALPHADX ETF	1/29/14	2/26/14	9,510.25	8,855.26	654.99
BAIRD 3122-3530	FT HLTHCR ALPHADX ETF	VARIOUS	4/16/14	40,194.17	35,711.03	4,483.14
BAIRD 3122-3530	FT CNSMR STPL ALPHDX ETF	6/18/14	6/25/14	6,046.42	6,123.10	(76.68)
BAIRD 3122-3530	FT ENERGY ALPHADX ETF	VARIOUS	6/18/14	6,102.87	5,611.42	491.45
BAIRD 3122-3530	FT ENERGY ALPHADX ETF	2/26/2014	6/25/14	6,411.06	5,550.97	860.09
BAIRD 3122-3530	FT FINLS ALPHADX ETF	VARIOUS	6/18/14	27,085.65	26,268.92	816.73
BAIRD 3122-3530	FT FINLS ALPHADX ETF	VARIOUS	6/25/14	6,337.78	6,059.46	278.32
BAIRD 3122-3530	FT INDL PROD DUR A/D ETF	VARIOUS	6/18/14	13,143.00	12,759.90	383.10

PAGE 1 OF 2

#### JEWISH FEDERATION OF SIOUX CITY, IOWA EIN: 42-0698205 8/31/2014

FORM 990 - PAGE 9, STATEMENT OF REVENUE: LINE 7a, 7b, 7c, & 7d

#### REALIZED GAIN/LOSSES SUMMARY SCHEDULE:

		DATE	DATE			
ACCOUNT	DESCRIPTION	ACQUIRED	SOLD	PROCEEDS	COST	GAIN
BAIRD 3122-3530	FT INDL PROD DUR Ad ETF	VARIOUS	6/25/14	6,119.45	5,762.93	356.52
BAIRD 3122-3530	FT MATRLS ALPHADX ETF	VARIOUS	6/18/14	26,778.85	26,097.05	681.80
BAIRD 3122-3530	FT MATRLS ALPHADX ETF	VARIOUS	6/25/14	6,478.21	6,187.12	291.09
BAIRD 3122-3530	FT TECH ALPHADX ETF	VARIOUS	6/18/14	28,299.91	26,938.21	1,361.70
BAIRD 3122-3530	FT TECH ALPHADX ETF	VARIOUS	6/25/14	6,235.02	5,832.43	402.59
BAIRD 3122-3530	FT TECH ALPHADX ETF	6/18/14	6/25/14	7,007.35	6,963.33	44.02
BAIRD 3122-3530	FT CONSMR DSCR ALPHDX ETF	7/9/14	7/16/14	38,985.51	39,432.11	(446.60)
BAIRD 3122-3530	FT CNSMR STPL ALPHDX ETF	6/18/14	7/9/14	5,131.18	5,162.61	(31.43)
BAIRD 3122-3530	FT ENERGY ALPHADX ETF	2/26/14	7/9/14	4,776.77	4,144.39	632.38
BAIRD 3122-3530	FT FINLS ALPHADX ETF	VARIOUS	7/9/14	4,796.23	4,447.27	348.96
BAIRD 3122-3530	FT HLTHCR ALPHADX ETF	6/25/14	79/914	4,685.59	4,700.63	(15.04)
BAIRD 3122-3530	FT INDL PROD DUR A/D ETF	2/5/14	7/9/14	4,652.82	4,151.12	501.70
BAIRD 3122-3530	FT MATRLS ALPHADX ETF	VARIOUS	7/9/14	4,759.61	4,281.44	478.17
BAIRD 3122-3530	FT TECH ALPHADX ETF	2/5/14	7/9/14	5,179.18	4,671.16	508.02
BAIRD 3122-3530	FT UTILS ALPHADX ETF	6/8/14	7/9/14	4,322.54	4,331.70	(9.16)
BAIRD 3122-3530	FT CNSMR STPL ALPHDX ETF	6/18/14	8/20/14	15,042.11	15,407.78	(365.67)
BAIRD 3122-3530	FT ENERGY ALPHADX ETF	VARIOUS	8/20/14	13,676.84	13,684.43	(7.59)
BAIRD 3122-3530	FT FINLS ALPHADX ETF	VARIOUS	8/20/14	14,834.28	14,548.50	285.78
BAIRD 3122-3530	FT HLTHCR ALPHADX ETF	6/25/14	8/20/14	14,919.41	14,475.79	443.62
BAIRD 3122-3530	FT INDL PROD DUR A/D ETF	VARIOUS	8/6/14	42,184.42	36,074.62	6,109.80
BAIRD 3122-3530	FT MATRLS ALPHADX ETF	VARIOUS	8/20/14	14,373.24	14,238.61	134.63
BAIRD 3122-3530	FT HLTHCR ALPHADX ETF	VARIOUS	8/20/14	14,938.45	14,570.40	368.05
BAIRD 3122-3530	FT UTILS ALPHADX ETF	VARIOUS	8/6/14	41,772.53	44,200.19	(2,427.66)
	TOTALS			968,389.57	936,222.23	32,167.34

PAGE 1 OF 2