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DLN: 93493160005205

# Form 990

Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

<b>B</b> Ch	eck ıf a	pplicable	endar year, or tax year beginni C Name of organization Jewish Federation of Greater House	<b>ng 09-01-2013</b> , <b>2013, and endi</b>	ng 08-31-:	2014	D Emplo	yer iden	tification number
_	dress ch me cha	-	Doing Business As				74-1:	109654	
_	me cna tial retu	_							
_	rmınate		Number and street (or P O box if 5603 South Braeswood Blvd	mail is not delivered to street address)	Room/suite		E Teleph	one numb	er
_	iriiliate iended		City or town state or province as	ountry, and ZIP or foreign postal code			(713)	729-70	000
_			Houston, TX 77096	ountry, and ZIP or foreign postal code					
Apj	plication	n pending		l				•	17,240,163
			F Name and address of pr Lee Wunsch 5603 South Braeswood	incipal officer		<b>H(a)</b> Is th subo	ıs a group rdınates?		for ┌Yes ┌ No
			Houston,TX 77096			<b>H(b)</b> Are a	ıll subord	nates	┌ Yes 🗸 No
						ınclu	ded?		
: Ta	x-exem	npt status	<b>✓</b> 501(c)(3)   501(c)( ) <b>◄</b>	(insert no ) 4947(a)(1) or 52	27	If "N	o," attach	ı a lıst (	see instructions)
W	ebsite	e: 🕨 ww	w houstonjewish org			H(c) Grou	ıp exempt	ion num	ber ►
<b>∢</b> For	m of or	ganızatıon	Corporation Trust Associat	tion Other ►		<b>L</b> Year of fo	rmation 19	940 <b>M</b> S	State of legal domicile TX
Pa	rt I	Sum	ımary			•		'	
Governance		Jewish F	ederation takes a leadership a lity by collaborating with worthy	sion or most significant activities pproach to overseeing programs a organizations, evaluating needs					
ě									
	2	Check th	nis box 🔰 if the organization o	discontinued its operations or dis	posed of r	nore than 2	5% of its	net ass	ets
Activities &	3	Number	of voting members of the gover	rning body (Part VI, line 1a) .				3	36
ë	1			s of the governing body (Part VI,				4	36
<u> </u>	5	Total nu	mber of individuals employed ii	n calendar year 2013 (Part V , line	e 2a) .			5	39
đ.	6	Total nu	mber of volunteers (estimate if	necessary)				6	300
	7a ·	Total un	related business revenue from	Part VIII, column (C), line 12 .				7a	0
	ь	Net unre	lated business taxable income	from Form 990-T, line 34				7b	
					ļ	Pric	r Year		Current Year
g <sub>i</sub>	8			line 1h)			14,852,		17,056,608
Revenue	9	-	•	line 2g)			210,	<del></del>	173,765
Š	10			nn (A), lines 3, 4, and 7d)	ŀ		-15,		9,790
	11 12			), lines 5, 6d, 8c, 9c, 10c, and 11 1 (must equal Part VIII, column	· ·		-21,	033	0
	12						15,027,	340	17,240,163
	13			rt IX, column (A), lines 1–3).			10,254,	974	10,862,818
	14	Benefi	ts paid to or for members (Part	IX, column (A), line 4)					0
ø	15	Saları 5–10)		yee benefits (Part IX, column (A)	, lines		2,445,	545	2,488,460
Expenses	16a			K, column (A), line 11e)			2,113,	-	2,100,100
Ð	Ь		indraising expenses (Part IX, column (						<del>-</del>
ш	17			), lines 11a–11d, 11f–24e)			1,515,	928	1,411,467
	18			ust equal Part IX, column (A), lin	1		14,216,		14,762,745
	19	Reven	ue less expenses Subtract lin	e 18 from line 12			810,	893	2,477,418
Net Assets or Fund Balances						Beginning Y	g of Curre 'ear	nt	End of Year
3.00 3.46 4.46	20	Total	assets (Part X, line 16)		[		10,741,	351	13,979,894
2 E	21						3,674,	432	4,415,892
	22			t line 21 from line 20			7,066,	919	9,564,002
Jnde my k prepa	nowled arer ha	alties of dge and as any ki	belief, it is true, correct, and conowledge  ** ature of officer	xamined this return, including accomplete Declaration of preparer (		officer) is			
Her	e		Ward-Hecksel Sr VP/CFO or print name and title						
		<u> </u>	Print/Type preparer's name	Preparer's signature	Date	) CL-	eck 🔽 ıf	PTIN	
Paid	d	J	ody Blazek	F aiginatai a		self	-employed	P000726	574
	<sub>u</sub> pare	۶ <b>r</b>   ۶	Firm's name 🕨 Blazek & Vetterling			Fim	n's EIN 🟲		
	yai e V On		Firm's address ► 2900 Weslayan Suite	200		Pho	ne no (713	3) 439-573	 39

Houston, TX 770275132

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

✓ Yes ☐ No

including grants of \$

Community Relations Committee (CRC) programs focus on education and information on domestic and international issues directly impacting the Jewish community

305,609

4d Other program services (Describe in Schedule O) (Expenses \$ 267,872 including grants of \$ ) (Revenue \$ 35,792)

Total program service expenses ► 12,255,319

4c

(Code

) (Expenses \$

) (Revenue \$

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II" Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		No No
	complete Schedule D, Part III 😼	8		INO
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V^{\bullet}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule $E$	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	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		Yes	
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		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)			No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

ген	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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   83		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			İ
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		) D		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year   7d   0			110
				ĺ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_		
_		8		No
9	Sponsoring organizations maintaining donor advised funds.			i
	Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	<u> </u>		
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Check if Schedule O contains a response or note to any line in this Part	Ι														.IV
--------------------------------------------------------------------------	---	--	--	--	--	--	--	--	--	--	--	--	--	--	-----

<u>Se</u>	ection 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	36			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	36			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rıor Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	aanız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
	Did the organization have members, stockholders, or other persons who had the pow					
	more members of the governing body?			7a		No
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	ı	No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ui	ndertaken during the		ı.	
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not a	requi	red by the Internal R	Reveni	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			ا مد ا		
Tou	Did the organization have local enapters, branches, or anniates.			10a		No
	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	ivitie	s of such chapters,	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the act	ivitie on's e	s of such chapters, xempt purposes?	10b	Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	ivitie on's e s gov orm 9	s of such chapters, xempt purposes? erning body before filing 	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with	s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FDId the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revi	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revisit independent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FDId the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  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 of	y inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	y interest of the presum a step	s of such chapters, xempt purposes? erning body before filing	10b  11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  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 of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organical participation in joint venture arrangements under applicable federal tax law, and take	y interest of the presum a step	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  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 of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	y interest of the presum a step	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	y interest of the present of the pre	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year  $\frac{1}{2}$ 

►Mary Ward-Hecksel 5603 South Braeswood Houston,TX 77096 (713)729-7000

Form 990	(2013)	
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#### 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion ( han d n is	ne l both	oox, an d	heck unless officer stee)	;	( <b>C</b> Repor comper from organiza	table isation the tion (W-	(E) Reportable compensation from related organizations (W	/-	(F) Estima amount o compens from t	ited f other sation :he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC	) c	organizati relate organiza	ed │
												$\perp$		
												+		
												+		
												$\dagger$		
												4		
												4		
												+		
1b	Sub-Total			_				<b> </b>				+		
c	Total from continuation sheet	s to Part VII, S	ection A	٠.				۲				+		
d	Total (add lines 1b and 1c) .							Þ		705,786				130,448
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho receive	d more th	ian			
													Yes	No
3	Did the organization list any fo					key	emplo	yee,	or highes	t compen	sated employee	1		
4	on line 1a? If "Yes," complete S For any individual listed on line					• mne	nsatio	• nano	d other cou	• • mnensatio	on from the	3		No
•	organization and related organ											۱.	\ \v	
5	Did any person listed on line 1	a receive or acc	crue cor	npen	• satı	• on fr	om an	• v unr	elated org	anızatıon	or individual for	4	Yes	
	services rendered to the organ	nızatıon? <i>If "Ye</i> s	," compl	ete S	ched	ule J	for su	ch pe	erson .			5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax year	
		(A) ame and business									(B) cription of services		(C Comper	)
Ricoh	USA 820 Gears Rd Houston TX 77067									Staff/copie	•			100,492
												1		
												$\exists$		
	Fotal number of independent co \$100,000 of compensation fron			not	lımıt	ed to	o thos	e list	ed above)	who rece	ived more than			

Part V	****	Check if Sched	o <b>r Revenue</b> ule O contains a respor	nse or note to any lir	ne in this Part VIII			
	1a	Federated cam			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats mts								
rar	b	Membership du						
S, G Am	C	Fundraising ev	ents <b>1c</b>					
iii ji	d	Related organiz	zations 1d	2,590,189				
S, Œ	e	Government grant	s (contributions) <b>1e</b>					
Contributions, Gifts, Grants and Other Similar Amounts	f	sımılar amounts no		14,466,419				
ĕĕŏ	g	Noncash contributi 1a-1f \$	ons included in lines					
Con	h	Total. Add lines	s 1a-1f		17,056,608			
e E	_			Business Code				
Yen	2a	Events/other		900099	18,447	18,447		
윤	Ь	Program ticket sale	es	900099	155,318	155,318		
MCA	C .							
) J	d							
띪	e	A.II						+
Program Serwice Revenue	f	All other progra	am service revenue					
<u>*</u>	g	Total. Add line:	s 2a-2f		173,765			
	3		ome (including dividendar amounts)		9,790			9,790
	4		ar amounts) street bond	l l	0			<u>'</u>
	5			` ▶	0			
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental inco	me or (loss)		0			
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory						
	ь	Less cost or other basis and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (los	ss)		0			
une	8a	Gross income fevents (not inc	luding					
Other Revenue		of contributions See Part IV, lir	s reported on line 1c) ne 18 a					
тhе	ь		penses b					
0	C		(loss) from fundraising	events 🛌	0			<u> </u>
	9a	Gross income f See Part IV, lir	rom gaming activities ne 19 a					
	Ь	Less direct ex	penses <b>b</b>					
			(loss) from gamıng actı	vities	0			
	10a	Gross sales of returns and allo	owances .					
	<u> </u>	Loop cost of	a a					
	b		oods sold <b>b</b> (loss) from sales of inve	entory -	0			
	٣	Miscellaneou		Business Code	, i			+
	11a		<del></del>					
	ь							1
	С							1
	d	All other reven	ue					1
	e		s 11a-11d		_			
	12		See Instructions	-	0			1
	ı	. J.u CVCIIUC.		· · · · 📂	17 240 163	173 765		9 790

Form	990 (2013)				Page <b>10</b>
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al	l other organizati	ons must comp	lete column (A )	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</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	10,782,968	10,782,968		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	79,850	79,850		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	701,651	110,707	277,226	313,718
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,447,797	614,620	444,790	388,387
8	Pension plan accruals and contributions (include section 401(k)	59,894	29 614	16 150	
9	and 403(b) employer contributions)	<u> </u>	28,614	16,150	15,130
	Other employee benefits	148,808	39,824	71,443	37,541
10	Payroll taxes	130,310	46,410	44,820	39,080
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	350		350	
С	Accounting	23,921		23,921	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	84,046	18,151	35,082	30,813
12	Advertising and promotion	67,506	3,181	46,012	18,313
13	Office expenses	106,211	23,637	52,874	29,700
14	Information technology	49,325	5,363	22,478	21,484
15	Royalties	0	3,303	22,170	21,101
16	Occupancy		0.143	102 561	15 521
		127,225	9,143	102,561	15,521
17	Travel	23,778	2,971	17,341	3,466
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	131,813	9,728	27,465	94,620
20	Interest	0		ļļ	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	9,707		9,707	
23	Insurance	31,348	6,358	14,197	10,793
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Program expenses	430,415	430,415		
b	Campaign programs	255,066			255,066
c	Other expenses	70,756	43,379	21,487	5,890
d					
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	14,762,745	12,255,319	1,227,904	1,279,522
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

Pai	rt X	Balance Sheet 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	697	1	2,396
	2	Savings and temporary cash investments	1,967,360	2	2,018,766
	3	Pledges and grants receivable, net	8,480,259	3	11,496,383
	4	Accounts receivable, net	9,067	4	56,552
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
<b>9</b> 0	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	0
Assets				6	0
8	7	Notes and loans receivable, net		7	0
	8	Inventories for sale or use		8	0
	9	Prepaid expenses and deferred charges	45,727	9	102,089
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  1,312,102			
	ь	Less accumulated depreciation 10b 1,110,466	147,843	<b>10</b> c	201,636
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities See Part IV, line 11	49,500	12	44,000
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	40,898	15	58,072
	16	Total assets. Add lines 1 through 15 (must equal line 34)	10,741,351	16	13,979,894
	17	Accounts payable and accrued expenses	155,625	17	296,903
	18	Grants payable	3,510,693	18	4,118,989
	19	Deferred revenue	8,114	19	
	20	Tax-exempt bond liabilities		20	
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	_
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qе		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	0.074.400	25	4 445 000
	26	Total liabilities. Add lines 17 through 25	3,674,432	26	4,415,892
on do		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	6,145,578	27	8,208,929
or Fund Balance	28	Temporarily restricted net assets	921,341	28	1,002,573
<u> </u>	29	Permanently restricted net assets	021,011	29	352,500
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and			302,000
<u> </u>		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Šet	33	Total net assets or fund balances	7,066,919	33	9,564,002
Z	34	Total liabilities and net assets/fund balances	10,741,351	34	13,979,894
					<u> </u>

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)				
		1		17,	240,163
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,	762,745
3	Revenue less expenses Subtract line 2 from line 1	3		2,4	477,418
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4			066,919
5	Net unrealized gains (losses) on investments	5			19,665
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		9,!	564,002
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. F
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or range a separate basis, consolidated basis, or both	eviewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a basis, consolidated basis, or both	separate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for over audit, review, or compilation of its financial statements and selection of an independent accountant?	sight of the	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explanation of the second sec	ain in			
3 <b>a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth is Single Audit Act and OMB Circular A-133?	n the	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		3b		

**Software ID:** 13000170 **Software Version:** 2013v4.0

**EIN:** 74-1109654

Name: Jewish Federation of Greater Houston

Note   Part	Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
Camerica   Camerica	(A)	(B) A verage hours per week (list any hours	Posit more the perso	ion ( nan o n is b	do no ne b ooth a ctor/	ox, u an of trus	inless fficer tee)		Reportable compensation from the organization (W-	Reportable compensation from related organizations (W-	Estimated amount of other compensation from the
Care in Challenge		organızatıons below	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	o mer		related
Chamman   1	Carol Goldberg	1 00	×		X				0	0	0
Pack Chammar					<u> </u>				,		
Dens Brotham			х						0	0	0
Marchane											
Vac Char	Vice Chair	1 00	Х		X				0	0	0
Marcharis	Don Brodsky	1 00	x		х				0	0	0
Vec Char							_				
Sect   Treature			Х		х				0	0	О
SecTreasurer											
New New Assertance   1 0 0	Sec/Treasurer	0 00	Х		Х				0	0	0
Tustee			v						0	0	0
Trustee									Ů		
Mark Bookner         1 00 0			х						0	0	0
Trustee											
Rachel Eichenbaum	Trustee		Х						0	0	0
Tustee         0 00 0 00 00 00 00 00 00 00 00 00 00 00									0	0	0
Trustee									0	0	0
Maria Feldman         1 00		1 00	х						0	0	0
Trustee											
Sandra Finkelman			Х						0	0	0
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Mindy Mitzner         1 00         X         0         0         0           Trustee         1 00         X         0         0         0           Susan Farb Morris         1 00         X         0         0         0           Trustee         2 00         X         0         0         0           Jack Polatsek         1 00         X         0         0         0           Trustee         0 00         X         0         0         0           Rabbi Joseph Radinsky         1 00         X         0         0         0			х						0	0	0
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Trustee         2 00         Image: Contract of the property of the p	Susan Farb Morris	1 00	x						0	n	0
Trustee								_			
Rabbi Joseph Radinsky 1 00 X 0 0 0			x						0	0	o
			<del>                                     </del>								
	Trustee	0 00	x						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more to more and individual trustee or director	ion (e nan o n is b	ne bo oth a ctor/	ox, u an of trus	inless fficer tee)		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		)   Site	rustee			ensated				
Russ Robinson	1 00	х						0	0	0
Trustee	0 00							,		
Rob Shoss Trustee	1 00 0 00	x						0	0	0
Rabbi Pam Silk	1 00									
Trustee	0 00	Х						0	0	0
Zachary Sılverman	1 00	х						0	0	0
Trustee	0 00									
Rick Stein	1 00	×						0	0	0
Trustee	0 00							_		
Sam Stolbun	1 00	x						0	0	0
Trustee Haya Varon	0 00									
	1 00	х						0	0	0
Trustee Naomi Warren	0 00									
		х						0	0	0
Trustee Sandy Weiner	0 00									
Trustee	1 00	х						0	0	0
Dolores Wilkenfeld	1 00									
Trustee	0 00	Х						0	0	0
Shira Yoshor	1 00									
Trustee	0 00	X						0	0	0
Lee Wunsch	32 00									
President & CEO	8 00			Х				294,427	0	69,199
Mary Ward-Hecksel	24 00			х				141,556	0	20,242
Sr VP/CFO	16 00			^				141,330	0	20,242
Suzanne Jacobson	39 00			х				140,455	0	20,758
Sr VP Develop	0 00	ļ						,		,
Elaine Kellerman	39 00					×		129,348	0	20,249
VP of Comm Pshp	0 00									

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As Filed Data -

DLN: 93493160005205

# **Public Charity Status and Public Support**

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

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

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

OMB No 1545-0047

Open to Public **Inspection** 

Name of the organization Jewish Federation of Greater Houston

**SCHEDULE A** 

(Form 990 or 990EZ)

Internal Revenue Service

Department of the

Treasury

**Employer identification number** 

					_ ,				74-1109				
	rt I			blic Charity Sta						<u>nstructions</u>	•		
	rganı		-	te foundation becaus	•		-	•	-				
1	<u> </u>			on of churches, or a				ection 170(	b)(1)(A)(i).				
2		A scho	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Schedı	ule E)						
3	Γ	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın <b>sectio</b>	n 170(b)(1	)(A)(iii).				
4	Γ	A medi	cal researcl	h organization operat	ted ın conjun	ction with a	hospital desc	cribed in <b>se</b>	ction 170(b)	(1)(A)(iii). E	nter the		
_	_			ty, and state							<del></del>		
5	ı	_	•	erated for the benefi	_	or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in		
	_	sect ion	170(b)(1)(	(A)(iv). (Complete P	art II )								
6		A feder	al, state, or	local government or	government	tal unit desc	rıbed ın <b>secti</b>	on 170(b)(	1)(A)(v).				
7	<u>~</u>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
8	г			on 170(b)(1)(A)(vi). described in section			nplete Part II	)					
9	,		-	at normally receives			-	-	butions, mem	bership fees	, and gross		
		_		rities related to its ex			* *		•	-	-		
				oss investment inco	•	-			• •				
			=	janızatıon after June				-		,			
10	$\vdash$			ganized and operated									
11	<u></u>			ganized and operated						to carry out i	the nurnoses of		
	'			ly supported organiz									
				bes the type of supp							(, (,		
		аΓ	Type I	b	┌ Type II	I - Function	ally integrate	d <b>d</b> 厂	Type III - N	on-functiona	illy integrated		
e	$\sqcap$	By chec	king this b	ox, I certify that the	organization	ıs not conti	rolled directly	or indirect	tly by one or i	more disqual	ıfıed persons		
				on managers and ot	her than one	or more pub	olicly support	ed organıza	itions describ	ed in sectio	n 509(a)(1) or		
_			509(a)(2)		_	form the ID	C +b-+ .b :	T T. T	- II - T.	TTT			
f		check t	_	received a written de	etermination	from the 1K	5 that it is a	iype i, iyp	be II, or I ype	III support	ng organization,		
g				2006, has the organi	zation accer	oted any gift	or contribution	on from any	of the		,		
			g persons?		,	, 3		•					
		(i) A pe	erson who d	irectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	escribed in (ii		Yes No		
		and (III)	below, the	governing body of th	e supported	organizatioi	n?			11g	<sub>i</sub> (i)		
		(ii) A fa	amıly memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)		
		(iii) A 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g	(iii)		
h		Provide	the follown	ng information about	the supporte	ed organızat	ıon(s)						
(	) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	the	(v) Did you	notify	(vi) Is	the	(vii) A mount of		
	uppor			organization	organızatı		the organiz		organizat		monetary		
OI	ganiza	ation		(described on	col (i) list		ın col (i) o		col (i) org		support		
				lines 1 - 9 above	your gove	_	suppor	t۶	ın the U	Si			
				or IRC section (see	docume	nt/							
				instructions))		1		I	-				
				,	Yes	No	Yes	No	Yes	No			
											Т		

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 19,116,677 20,381,288 16,006,041 14,852,618 17,056,608 87,413,232 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 19,116,677 20,381,288 16,006,041 14,852,618 17,056,608 87,413,232 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 2,808,655 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 84,604,577 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 **(e)** 2013 (a) 2009 (d) 2012 (f) Total beginning in) 🟲 19,116,677 20,381,288 16,006,041 Amounts from line 4 14,852,618 17,056,608 87,413,232 Gross income from interest, dividends, payments received on 9,790 19,095 7,674 securities loans, rents, royalties 15,651 10,167 62,377 and income from similar sources Net income from unrelated business activities, whether or O not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 87,475,609 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 930,588 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 96 720 % Public support percentage for 2012 Schedule A, Part II, line 14 15 96 830 % 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 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

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

<b>Part IV Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a o 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).										
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 0	000 er 000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493160005205

## OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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.

Open to Public Inspection

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

	me of the organization			Employer ide	ntification number
3011				74-1109654	
ar	t I-A Complete if the or	ganization is exempt under s	section 501(	c) or is a section 52	7 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign act	ıvıtıes ın Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under :	section 501(	c)(3).	
1	•	e tax incurred by the organization unc			\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	1 4955 <b>►</b>	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under s	section 501(	c), except section 5	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	rganızatıon's funds contributed to otl	ner organizations	for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	m the filing organization's to a separate political org	funds Also enter the anization, such as a
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
					+

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

**f** Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2013						Page 2
Pä	art III-A Complete if the organization	is exemp	t under	section 501(	c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► If the filing organization belongs to a	on offiliated	aroup (and	List in Dort IV or	ah affiliated are	un mambaria nam	o addraga ETN
^	expenses, and share of excess lobb			iistiii Paitiv ea	ich ammateu gro	up member s nam	e, address, ETN
<u>B</u>	Check ► ☐ if the filing organization checked bo	x A and "lim	ited contro	ol" provisions ap	oly		
	Limits on Lobbying E (The term "expenditures" means ar			l.)		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	opinion (gras	s roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (	direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1						
f	Lobbying nontaxable amount Enter the amount is columns						
	If the amount on line 1e, column (a) or (b) is:	The lobbyi	ing nontax	able amount is:			
	Not over \$500,000	20% of the	amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the	e excess over \$500,	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	us 10% of the	e excess over \$1,00	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the	excess over \$1,500	000		
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)					
h	Subtract line 1g from line 1a If zero or less, ent	er-0-					
i	Subtract line 1f from line 1c If zero or less, ente	er-0-					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line	1ı, dıd the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t Lobbying Exp	section 5 he instruc	01(h) el ctions fo	r lines 2a thr	have to cor ough 2f on p		ne five
	Calendar year (or fiscal year beginning in)	(a	) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	(e) Total
<u>2a</u>	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ОТ				age <b>3</b>
For a	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(;	a)		(b)	
activ		Yes	No		A mour	nt
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		l			
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
C	Media advertisements?		No			
d	Mailings to members, legislators, or the public?	Yes				100
е		Yes				
f	Grants to other organizations for lobbying purposes?		Νo			
g		Yes			Ġ	93,106
h		Yes				
i	<u> </u>	Yes				8,946
j	Total Add lines 1c through 1i		ī		10	02,152
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	1		
Ь	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		1			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	U1(C	)(5),	or s		n —
					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	<u> </u>	
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	art IV Supplemental Information					
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group rt II-B, line 1 Also, complete this part for any additional information	lıst),	Part I	I-A,	line 2,	and
	Return Reference Explanation					
	The Jewish Federation's Community Relations Committee initiated and participation  The Jewish Federation's Community Relations Committee initiated and participation  efforts on issues directly impacting the Jewish community and its constitution national levels. The efforts included discussions with city, state, and national issues involving health and human services, international affairs, and community to the process of them about Israel and the Jewish community's issues.	uents onal e nmuni	on the lected ty con	loca offic erns	l, state lals on The C	CRC

Belledale e (Form 330 of	-		rage <del>-r</del>
Part IV Suppler	nental Information <i>(continu</i>	ed)	
Return Referer	ce	Explanation	
-			
-			

Schedule D (Form 990) 2013

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#### DLN: 93493160005205

OMB No 1545-0047

**SCHEDULE D** (Form 990)

► 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

**Supplemental Financial Statements** 

► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public Department of the Treasury and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** Jewish Federation of Greater Houston 74-1109654 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education)  $\Gamma$  Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

Part	•••• Organizations Maintaining Co	llections of Art, H	<u>listor</u>	<u>ical Tr</u>	easu	res, or Ot	<u>her Si</u>	<u>milar Ass</u>	ets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	check	any of t	he follo	wing that ai	e a sıgn	ıfıcant use o	ofits	
а	Public exhibition	c	, L	Loan	or exch	ange progra	ms			
b	Scholarly research	e	• 「	Other						
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and explain h	now the	ey furthe	r the o	rganızatıon's	s exemp	t purpose ın		
5	During the year, did the organization solicit							_	_	_
	assets to be sold to raise funds rather than t								Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					answered	"Yes"	to Form 99	, 	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermedia	ary for	contribu	tions o	r other asse	ts not	Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XI	I and complete the fol	lowing	table						
						_		Amo	ount	
С	Beginning balance					<u> </u> :	lc			
d	Additions during the year					<u> </u>	Ld			
е	Distributions during the year					<u> </u>	le			
f	Ending balance					<u>_</u> :	Lf			
2a	Did the organization include an amount on Fe	orm 990, Part X, line 2	1?					Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I Check here if the ex	planat	ion has	been pi	rovided in Pa	art XIII			Γ
Pa	rt V Endowment Funds. Complete									
			<b>(b)</b> Prior		<b>b (c)</b> Tw	o years back				ears back
1a	Beginning of year balance	106,445,360		5,920,145		89,072,982		81,674,559		77,490,544
b	Contributions	32,015,674	24	1,635,464		14,686,040		15,141,907	1	14,114,975
C	Net investment earnings, gains, and losses	11,757,949	7	7,318,358		5,070,105		5,832,826		3,270,220
d	Grants or scholarships	16,554,831	20	),560,583		12,102,927		13,576,310	1	13,201,180
e	Other expenditures for facilities and programs									
f	Administrative expenses	932,350		868,024		806,055				
g	End of year balance	132,731,802	106	,445,360		95,920,145		89,072,982	8	81,674,559
2	Provide the estimated percentage of the cur	rent year end balance (	line 1	g, colum	n (a)) h	eld as				
а	Board designated or quasi-endowment ►	97 680 %								
b	Permanent endowment ► 1 860 %									
C	Temporarily restricted endowment ► 0.4 The percentages in lines 2a, 2b, and 2c sho	60 % uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organizatio	n that	are held	l and a	dmınıstered	for the			
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		No
ь	(ii) related organizations							3b	Yes	<u>                                       </u>
4	Describe in Part XIII the intended uses of the	•			•				1103	<u> </u>
Par	t VI Land, Buildings, and Equipme				answ	ered 'Yes'	to Forr	n 990, Par	t IV, lıı	ne
	11a. See Form 990, Part X, line	10.	- 1			l # > 0 · · · ·			1 (1) 5	
	Description of property			a) Cost or asis (inves		(b)Cost or ot basis (othe		Accumulated lepreciation	( <b>a</b> ) B	ook value
1a	Land				6,000					6,000
Ь	Buildings					935,	519	805,700		129,819
c	Leasehold improvements									
d I	Equipment					309,	130	243,313	3	65,817
	Other						453	61,453	3	
Tota	<b>I.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X, c	olumn	(B), line	10(c).)			. 🕨		201,636
				-				Schedule D	Form 9	90) 2013

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete if the organizati	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>+</b>	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
		<u> </u>
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the property of the	anization answered 'Yes'	' to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
		1
		4
		7
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )		†
Total. (Column (b) mast equal rollin 990, Fart A, col (b) line 25 7		-

Par		wered 'Yes' to Form 990, Part IV, line 12		ts with Revenue p	oer Ke	<b>sturn</b> Complete if
1		er support per audited financial statements .			1	
2	Amounts included on line 1 bi	ut not on Form 990, Part VIII, line 12				
а	Net unrealized gains on inves	tments	2a			
b	Donated services and use of f	acılıtıes	2b		1	
c	Recoveries of prior year grant	s	2c		1	
d	Other (Describe in Part XIII )	)	2d		1	
e	Add lines <b>2a</b> through <b>2d</b> .				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )	)	4b			
c	Add lines <b>4a</b> and <b>4b</b>				4c	
5	Total revenue Add lines <b>3</b> and	d <b>4c.</b> (This must equal Form 990, Part I, line 1	12).		5	
Part		xpenses per Audited Financial Stat swered 'Yes' to Form 990, Part IV, line			s per	Return. Complete
1	Total expenses and losses pe	r audited financial statements			1	
2	Amounts included on line 1 bu	it not on Form 990, Part IX, line 25				
а	Donated services and use of f	acılıtıes	2a			
b	Prior year adjustments		2b			
c	Otherlosses		2c			
d	Other (Describe in Part XIII )	( <b></b>	2d		_	
e	Add lines $2a$ through $2d$				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		_		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	·	4b		_	
c	Add lines <b>4a</b> and <b>4b</b>				4c	
5		nd <b>4c.</b> (This must equal Form 990, Part I, line	18)		5	
Part	Supplemental Int	formation				
Part		Part II, lines 3, 5, and 9, Part III, lines 1a a , lines 2d and 4b, and Part XII, lines 2d and 4				le any additional
	Return Reference	Explanation				
	/, Line 4 Intended uses of the vment fund	To support the mission of the Jewish Federa Communal life through innovative and vision Jewish communities locally, nationally, in Is	nary le	adership that is respor		

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

**Employer identification number** 

Jewish Federation of Greater Houston				74-1109654	
Part I General Informatio "Yes" to Form 990, Pa			ne United States. Co	omplete if the organiz	ation answered
1 For grantmakers. Does the o other assistance, the grantee to award the grants or assist	es' eligibility fo	r the grants o	r assistance, and the s	selection criteria used	d Yes No
<ul><li>2 For grantmakers. Describe in assistance outside the United</li><li>3 Activites per Region (The follow</li></ul>	d States.	-		-	s and other
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in region
(1) Middle East/N Africa	0		Program services	Mission trip	70,452
( 2) Mıddle East/N Afrıca	0	0	Investments		44,000
(3)					
(4)					
(5)					
3a Sub-total b Total from continuation sheets to Part I					114,452
c Totals (add lines 3a and 3b)					114,452

Part II						i <b>ted States.</b> Compl duplicated if additior	9		to Form 990,
	ame of nization	(b) IRS code section and EIN (if applicable)	<b>(c)</b> Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
( 2)									
(3)									
(4)									
						es by the foreign co (c)(3) equivalency l			
3 Ente	er total num	nber of other or	ganızatıons or ent	ities					

Schedule F (Form 990) 2013

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

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

# Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	F	N	0
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	딕	N	0
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	٦	N	0
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	N	0
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	V	N	0
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	آب حا	N	0

Schedule F (Form 990) 2013

#### **Additional Data**

**Software ID:** 13000170

Software Version: 2013v4.0

**EIN:** 74-1109654

Name: Jewish Federation of Greater Houston

Schedule F (Form 990) 2013

Page **5** 

#### Part V Supplemental Information

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

DLN: 93493160005205

OMB No 1545-0047

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990 Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Jewish Federation of Greater Houston 74-1109654 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 ✓ Yes ☐ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section valuation non-cash assistance grant cash orassistance or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 89

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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				
				+					
(1) Israel Trıp and Camp Scholarshıps	99	75,350							
(2) Teacher grants	13	4,500							
Part IV Supplemental Informa	ation. Provide the info	mation required in P	art I, line 2, Part III,	column (b), and any other	additional information.				
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.  Return Reference Evaluation									

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.										
Return Reference	Explanation									
Additional Supplemental Information	he Jewish Federation of Greater Houston is reporting grants to the Jewish Federations of North America (JFNA) which is a 501(c)(3) domestic U S harity. In addition, JFNA, and its beneficiary agencies, United Israel Appeal (UIA), a subsidiary of JFNA, and the American Jewish Joint Distribution ommittee (JDC) - both 501(c)(3) organizations - each file a separate Form 990 and detailed Schedule F									
Grantmaker's Description of How Grants are Used	The Federation supports organizations that Provide vital assistance such as food, shelter and medical care, Educate the youth of our community, Provide senior care services & programming, Facilitate leadership development and youth engagement programming, Reconnect Jews with the Jewish community, Offer Jewish programming for young families and children, Develop Israel advocacy skills, support Israel travel for youth, Aid people with special needs There is no additional monitoring once grants have been awarded									

### **Additional Data**

**Software ID:** 13000170

**Software Version:** 2013v4.0

**EIN:** 74-1109654

Name: Jewish Federation of Greater Houston

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

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
All 4 Israel Inc 53 Dewhurst St Staten Island, NY 10314	05-0553417	501(c)(3)	50,000	0			General Support

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Am Friends of Netanya College 270 Madison Avenue 9th Floor New York, NY 10016	13-3937453	501(c)(3)	150,000	0			General Support		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Am Friends of New Comm in Isr 169 10 73rd Avenue Flushing,NY 11366	31-1740763	501(c)(3)	50,000	0			Hadadı- Annual Support		

Form 990,Schedule 1, Pa	-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Am Jewish Jnt Distribution Co 711 Third Ave 10th Floor New York, NY 10017	13-1656634	501(c)(3)	100,000	0			Multiple Programs			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Am Jewish Jnt Distribution Co 711 Third Ave 10th Floor New York, NY 10017	13-1656634	501(c)(3)	116,027	0			Support for at-risk children			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Am Jewish Jnt Distribution Co 711 Third Ave 10th Floor New York, NY 10017	13-1656634	501(c)(3)	21,517	0			Cuba Support & Misc Prog			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Am Jewish Jnt Distribution Co 711 Third Ave 10th Floor New York, NY 10017	13-1656634	501(c)(3)	345,000	0			Aging w/ Dignity Program		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Am Jewish Jnt Distribution Co 711 Third Ave 10th Floor New York, NY 10017	13-1656634	501(c)(3)	371,750	0			Equal Emplymnt Arab- Israelis				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Am Jewish Jnt Distribution Co 711 Third Ave 10th Floor New York, NY 10017	13-1656634	501(c)(3)	7,250	0		1	Ethiopia Women's Scholarships		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
American Friends of Meir Panim 5316 New Utrecht Ave Brooklyn, NY 11219	20-1582478	501(c)(3)	51,000	0			Nutrition Center		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
American Friends of NATAL Inc 1120 Ave of the Americas 4th New York, NY 10036	20-1914370	501(c)(3)	10,000	0			Support for Trauma Vıctıms			

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Beth Yeshurun Day School 4525 Beechnut Houston,TX 77096	74-1222268	501(c)(3)	101,600	0			O perating Funds			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Bikur Vizrat Cholim Inc 1221 42nd St Brooklyn, NY 11219	20-1572620	501(c)(3)	100,000	0			Home for Special Needs Children		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Birthright Israel Foundation 33 East 33rd St 7th Floor New York, NY 10016	13-4092050	501(c)(3)	187,900	0			Young Adult Travel to Israel		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Bnai Brith Youth Organization 5601 South Braeswood Blvd Houston,TX 77096	31-1794932	501(c)(3)	36,900	0			O perating Funds		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Camp Young Judaea 9647 Hillcroft Houston,TX 77096	74-6063430	501(c)(3)	8,725	0			Camp Scholarships			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Central Fund of Israel 980 Ave of the Americas 3rd New York, NY 10018	13-2992985	501(c)(3)	150,000	0			Shurat Hadın-Israel Law Ctr		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Central Fund of Israel 980 Ave of the Americas 3rd New York, NY 10018	13-2992985	501(c)(3)	75,000	0			Matnat Shichrur		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Christian Friends of Israeli PO Box 50833 Colorado Spring,CO 80949	41-2020104	501(c)(3)	50,000	0			Heart of Benjamın		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Cong Beth Shalom of Woodlands 5125 Shadow Bend Pl The Woodlands,TX 77381	76-0030790	501(c)(3)	49,500	0			General Support		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Emery Weiner Cntr for Jewish 9825 Stella Link Houston, TX 77025	74-1990541	501(c)(3)	229,775	0			O perating Funds		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Emery Weiner Cntr for Jewish 9825 Stella Link Houston, TX 77025	74-1990541	501(c)(3)	6,400	0			Israel Scholarships		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Evelyn Rubenstein JCC Hous 5601 S Braeswood Blvd Houston,TX 77096	74-1198298	501(c)(3)	31,100	0			Shaliach		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Evelyn Rubenstein JCC Hous 5601 S Braeswood Blvd Houston,TX 77096	74-1198298	501(c)(3)	38,303	0			Meals on Wheels		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Evelyn Rubenstein JCC Hous 5601 S Braeswood Blvd Houston,TX 77096	74-1198298	501(c)(3)	59,000	0			Senior Companion Program		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Evelyn Rubenstein JCC Hous 5601 S Braeswood Blvd Houston,TX 77096	74-1198298	501(c)(3)	702,411	0			O perating Funds			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Evelyn Rubenstein JCC Hous 5601 S Braeswood Blvd Houston,TX 77096	74-1198298	501(c)(3)	76,700	0			Young Families Programs		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Friends of Nahal Haredi 127 Route 59 Monsey,NY 10952	13-4069565	501(c)(3)	50,000	0			Acculteration of Haredi Soldiers		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Friends of the Isr Defense 1430 Broadway Rm 1301 New York, NY 10018	13-3156445	501(c)(3)	10,000	0			Emergency Aıd			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Friends of the Isr Defense 1430 Broadway Rm 1301 New York, NY 10018	13-3156445	501(c)(3)	60,000	0			Lone Soldiers		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Friends of the Isr Defense Forces 1430 Broadway Rm 1301 New York, NY 10028	13-3156445	501(c)(3)	50,000	0			General Support		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Hand in Hand P O Box 80102 Portland, OR 97280	93-1269590	501(c)(3)	21,500	0			U nrestricted			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Hebrew Free Loan Assoc 4131 South Braeswood Blvd Houston,TX 77025	76-0069644	501(c)(3)	20,000	0			Small Business Loans			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Honest Reportingcom Inc 10024 Skokie Blvd Ste 201 Skokie,IL 60077	06-1611859	501(c)(3)	10,000	0			Unrestricted		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Houston Hillel Inc 1700 Bissonnet Houston,TX 77005	76-0684042	501(c)(3)	160,000	0			General Support		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Houston Jewish Community Fndn 5603 S Braeswood Blvd Houston,TX 77096	76-0187329	501(c)(3)	10,600	0			Segal College & Special Project		

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Houston Jewish Community Fndn 5603 South Braeswood Houston,TX 77096	76-0187329	501(c)(3)	210,000	0			Young Adult Programming			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Houston Jewish Community Fndn 5603 South Braeswood Houston,TX 77096	76-0187329	501(c)(3)	24,000	0			Shabbat Limmud		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Houston Jewish Community Fndn 5603 South Braeswood Houston,TX 77096	76-0187329	501(c)(3)	52,875	0			Chaplaincy			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Houston Jewish Community Fndn 5603 South Braeswood Houston,TX 77096	76-0187329	501(c)(3)	62,633	0			PJ Library		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Houston Jewish Community Fndn 5603 South Braeswood Houston,TX 77096	76-0187329	501(c)(3)	778,537	0			JFS Financial Assist Endwmnt			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Interfaith Ministries for Gr 3217 Montrose Blvd Houston,TX 77006	74-1488102	501(c)(3)	6,000	0			O perating Funds		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Israel Help Organization Inc 11271 Alumni Way Jacksonville,FL 32246	20-3979417	501(c)(3)	50,000	0			Services for Families at Risk			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JCC Association of N Amer 520 Eighth Ave 4th Floor New York, NY 10018	13-5599486	501(c)(3)	15,000	0			O perating Funds			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Jewish Childrens Regional Sv PO Box 7368 Metari, LA 70010	72-0408936	501(c)(3)	6,000	0			O perating Funds		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Jewish Family Service 4131 S Braeswood Houston,TX 77025	74-1152607	501(c)(3)	257,000	0			Senior/Special Needs			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Jewish Family Service 4131 S Braeswood Houston,TX 77025	74-1152607	501(c)(3)	664,540	0			Promise of Hope			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Jewish National Fund 42 East 69th Street New York, NY 10021	13-1659627	501(c)(3)	500,270	0			Nefesh B'Nefesh		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Jewish Outreach Institute 1270 Broadway Ste 609 New York, NY 10001	42-1317696	501(c)(3)	25,654	0			Comm Scan/O utreach Coord			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Jewish Philosopy Fund Inc 54 Running Fox Rd Columbia, SC 29223	46-1182338	501(c)(3)	50,000	0			Herzl Institute- YngLdrshp Prog		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Just One Life Inc 587 5th Ave Ste 702 New York, NY 10017	13-3533863	501(c)(3)	100,000	0			General Support		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Leo Baeck Ed Center Fndn 3555 Timmons Ste 1440 Houston,TX 77027	76-0205816	501(c)(3)	134,000	0			YEDA			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Leo Baeck Ed Center Fndn 3555 Timmons Ste 1440 Houston,TX 77027	76-0205816	501(c)(3)	15,000	0			Early Childhood Program		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Moishe House 441 Saxony Road Barn 2 Encinitas, CA 92024	26-2599786	501(c)(3)	41,000	0			General Support		

Form 990,Schedule 1, Pa	Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Ohr Torah Stone Insts of Isra 49 W 45th St Suite 701 New York, NY 10036	13-3275531	501(c)(3)	150,000	0			CJCUC			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Or LDoron 567 Cedar Hıll Rd Far Rockaway, NY 11691	45-4013676	501(c)(3)	100,000	0			Prog for Deaf&Hearing I mpaired			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PEF Israel Endowmnt Funds 317 Madison Ave New York, NY 10017	13-6104086	501(c)(3)	100,000	0			A vukat- O r			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Robert M Beren Academy 11333 Cliffwood Dr Houston,TX 77035	74-1652136	501(c)(3)	178,233	0			O perating Funds			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Robert M Beren Academy 11333 Cliffwood Dr Houston,TX 77035	74-1652136	501(c)(3)	6,275	0		l	Israel & Camp Scholarships		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Save a Childs Heart Fdn 10050 Chapel Road Suite 18 Potomac,MD 20854	52-1783323	501(c)(3)	125,320	0			Pediatric Intensive Care Svcs		

Form 990,Schedule 1, Pa	-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Sephardic Gan Toret Emet Inc 9730 Hillcroft Houston,TX 77096	20-1354171	501(c)(3)	103,728	0			O perating Funds			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Seven Acres Jewish Sr Care Sv 6200 N Braeswood Blvd Houston,TX 77074	74-1143086	501(c)(3)	41,000	0			Geriatric Outreach Nurse		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Seven Acres Jewish Sr Care Sv 6200 N Braeswood Blvd Houston,TX 77074	74-1143086	501(c)(3)	465,122	0			O perating Funds		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance		
Seven Acres Jewish Sr Care Svcs 6200 N Braeswood Blvd Houston,TX 77074	74-1143086	501(c)(3)	22,133	0			Unrestricted		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Texas Hillel Foundation 2105 San Antonio St Austin, TX 78705	52-1758802	501(c)(3)	69,825	0			General Support		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Am Friends of Migdal Ohr 1560 Broadway Suite 807 New York, NY 10036	13-3389558	501(c)(3)	55,000	0			Children's housing & education		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Hillel at Texas A&M 505 University Dr East College Station,TX 77840	74-1398514	501(c)(3)	26,000	0			General Support			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	15,000	0			JAFI MASA Career Program		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	11,186	0			Multiple Programs		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	120,000	0			JAFI-Victims of Terror			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	162,000	0			Y oseftal-Dado			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	169,424	0			Israel Emergency Funds			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	24,000	0			Bırthrıght Israel			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	250,000	0			JAFI-Immigration & Absorption		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	300,349	0			Fair Share-O perating Exps		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	309,613	0			JDC- Basıc Needs		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	55,000	0			Hadassah Neurim		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	75,000	0			Leo Baeck Education Cntr Fndn		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Jewish Federations of NA 25 Broadway Suite 1700 New York, NY 10004	13-1624240	501(c)(3)	759,000	0			JA FI - Unrestricted			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Koby Mandell Fndn Inc 366 Pearsall Ave Ste 1 Cedarhurst, NY 11516	91-2169027	501(c)(3)	53,719	0			Camp Koby		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Shlenker School 5600 North Braeswood Blvd Houston,TX 77096	76-0686559	501(c)(3)	111,375	0			O perating Funds		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Tikva Corp 475 10th Ave 9th Floor New York, NY 10018	22-3779212	501(c)(3)	11,000	0			Unrestricted		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Torah Day School 10900 Fondren Houston,TX 77096	23-7278350	501(c)(3)	79,863	0			O perating Funds		

orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Union for Ref Judaism- Greene 1192 Smith Lane Bruceville,TX 76630	13-1663143	501(c)(3)	11,950	0			Camp Scholarships		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Union for Ref Judaism- Greene 1192 Smith Lane Bruceville,TX 76630	13-1663143	501(c)(3)	8,000	0			Social Media		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States													
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
Womens Intl Zionist Org 1150 Kane Concourse 5th Floor Bay Harbor Isla,FL 33154	13-3041381	501(c)(3)	50,000	0			Education & Welfare						

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States													
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance							
World ORT Inc 1745 Broadway 17th Floor New York, NY 10019	06-1669917	501(c)(3)	100,000	0			Vocational Training							

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States													
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance							
World ORT Inc 1745 Broadway 17th Floor New York, NY 10019	06-1669917	501(c)(3)	46,000	0			General Support							

<u> Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
Zecher Avrohom Inc 1715 51st Street Brooklyn, NY 11204	26-3744888	501(c)(3)	75,000	0			Support for At-Risk Families						

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DLN: 93493160005205

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization Jewish Federation of Greater Houston **Employer identification number** 

74-1109654

Pa	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any o 990, Part VII, Section A, line 1a Complete Part III to provide				
	First-class or charter travel	ousing allowance or residence for personal use			
	□ Travel for companions     □ Pa	yments for business use of personal residence			
	, , , , , , , , , , , , , , , , , , , ,	ealth or social club dues or initiation fees			
	Discretionary spending account Pe	rsonal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization f reimbursement or provision of all of the expenses described abo		1b	Yes	
2	Did the organization require substantiation prior to reimbursing				
	directors, trustees, officers, including the CEO/Executive Direc	ctor, regarding the items thecked in line 14.	2	Yes	
3	Indicate which, if any, of the following the filing organization use organization's CEO/Executive Director Check all that apply Dused by a related organization to establish compensation of the	o not check any boxes for methods			
		ritten employment contract			
		ompensation survey or study			
	Form 990 of other organizations	oproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Se or a related organization	ection A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		Νo
b	Participate in, or receive payment from, a supplemental nonqua	lified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compe	ensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the ap	pplicable amounts for each item in Part III			
	Only FO1/c)(2) and FO1/c)(4) aggregations only much complete	a linea E O			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete For persons listed in Form 990, Part VII, Section A, line 1a, did				
	compensation contingent on the revenues of				
а	The organization?		5a		No
b	Any related organization?		5b		No
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, dic compensation contingent on the net earnings of	d the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did payments not described in lines 5 and 6? If "Yes," describe in F		7		No
8	Were any amounts reported in Form 990, Part VII, paid or accu				
	subject to the initial contract exception described in Regulation	ns section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 $4958-6(c)$ ?	presumption procedure described in Regulations	9		No

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

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred ın prıor Form 990
(1)Lee Wunsch President & CEO	(i) (ii)	294,427			46,862	22,337	363,626	
(2)Mary Ward-Hecksel Sr VP/CFO	(i) (ii)	141,556			9,315	10,927	161,798	
(3)Suzanne Jacobson Sr VP Develop	(i) (ii)	140,455			9,347	11,411	161,213	

Schedule J (Form 990) 2013

## Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete th	us part for any	' addıtıonal ın	formation
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Return Reference	Explanation
ın regards to selections on 1a	The Federation pays \$41 per month for telephone/internet service used for business purposes at the home of Lee Wunsch, President & CEO These payments are not treated as taxable compensation because they are deemed to be expenses relating to his services provided to the Federation During the year, the Federation paid for first-class travel expenses of Lee Wunsch which was not treated as taxable compensation because they were deemed to be expenses relating to his services provided to the Federation

**Schedule J (Form 990) 2013** 

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DLN: 93493160005205

OMB No 1545-0047

Open to Public Inspection

**SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization Jewish Federation of Greater Houston Employer identification number

74-1109654

### 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4d Other Program Services Description	
Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	Elyse Kalmans and Naomi Warren have a family relationship Elyse Kalmans and Arturo Karakow sky have a business relationship Nat Levy and Denis Braham have a business relationship Na t Levy and Sandra Finkelman have a business relationship Nat Levy and David Hess have a bu siness relationship Nat Levy and Jacob Leon have a business relationship Nat Levy and Haya Varon have a business relationship Nat Levy and Lee Wunsch have a business relationship N at Levy and Mary Ward-Hecksel have a business relationship Russ Robinson and Joe Kaplan ha ve a business relationship Dolores Wilkenfeld and Mark Brookner have a business relationsh ip Lee Wunsch and Jacob Leon have a business relationship
Form 990, Part VI, Line 11b Form 990 Review Process	The Form is reviewed by the Controller and CFO and made available to Board members on the Federation's website, prior to filing
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	A Conflict of Interest Statement is distributed to Board members every year and several fo llow ups are made. If there are conflicts of interest, they are addressed with the Preside int and CEO and the Chair of the Board. If appropriate, after discussion, the conflict is b rought before the Board.
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Personnel Sub-Committee of the Board consisting of the Chairman of Board, Chairman of the Budget and Finance Committee and the Chairman of the Personnel Committee is responsible for determining the compensation of the organization's President & CEO after a review of comparable data of non-profit sister agencies of similar size
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The Personnel Sub-Committee of the Board consisting of the Chairman of Board, Chairman of the Budget and Finance Committee and the Chairman of the Personnel Committee is responsible for determining the compensation of the organization's officers and key employees after a review of comparable data of non-profit sister agencies of similar size
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Upon request

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

# SCHEDULE R (Form 990)

Name of the organization

Jewish Federation of Greater Houston

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part I

**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.

OMB No 1545-0047

Schedule R (Form 990) 2013

**Employer identification number** 

74-1109654

DLN: 93493160005205

2013

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Part 1 Identification of Disregarded Entities Comp	olete if the organization	answered "Yes" or	n Form 990, Par	t IV, line 33.			
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) ind-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	the tax year.		_		· 		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		Section (13) cor enti	512 ntro
(1) Houston Jewish Community Fdn	Support the Jewish Federation of Gr. Hou	тх	501(c)(3)	509(a)(1)	Jewish Federation of Greater Houston	Yes Yes	I
5603 South Braeswood Blvd							
Houston, TX 77096 76-0187329							L
(2) Mary L & William J Osher Fd 5603 South Braeswood Blvd	Support the Jewish Federation of Gr Hou	TX	501(c)(3)	509(a)(3) I	Jewish Federation of Greater Houston	Yes	
Houston, TX 77096 20-5094518							
(3) The Becker Family Foundation	Support the Jewish Federation of Gr. Hou	ТХ	501(c)(3)	509(a)(3) I	Jewish Federation of Greater Houston	Yes	$\vdash$
5603 South Braeswood Blvd	redefation of Grandu				Gleater Houston		
Houston, TX 77096 76-0560995							
(4) Alan F & Diane R Levin Fd	Support the Jewish Federation of Gr Hou	TX	501(c)(3)	509(a)(3) I	Jewish Federation of Greater Houston	Yes	
5603 South Braeswood Blvd Houston, TX 77096							
76-0613294  (5) The Rauch Foundation	Support the Jewish	ТХ	F01(a)(2)	F00(a)(3) I	lawah Fadamtian af	Vas	lacksquare
5603 South Braeswood Blvd	Federation of Gr Hou	12	501(c)(3)	509(a)(3) I	Jewish Federation of Greater Houston	Yes	
Houston, TX 77096							
76-0300344 <b>(6)</b> The Samuels Foundation	Support the Jewish	TX	501(c)(3)	509(a)(3) I	Jewish Federation of	Yes	$\vdash$
5603 South Braeswood Blvd	Federation of Gr Hou				Greater Houston		
Houston, TX 77096 76-0207517							
(7) Donald & Martha Kaplan Freedman Fd	Support the Houston	ТХ	501(c)(3)	509(a)(3) I	Houston Jewish	Yes	$\vdash$
5603 S Braeswood Blvd	Jewish Community Fd				Community Foundation		
Houston, TX 77096 45-5449056							

Cat No 50135Y

because it had one or more re	lated organizations trea						T (6)	(-)	1 "		/:>	Τ,		/1.3	
<b>(a)</b> Name, address, and EIN o related organization	f	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	t Pred Ing Incom Uncom exclu ta sect	(e) dominant ne(related, related, uded from x under ions 512- 514)	(f) Share o total inco	( <b>g</b> ) f Share of me end-of-yea assets	( <b>†</b> Disprop r alloca	prtionate	(i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percenta ownersh	ge up
							<u> </u>		Yes	No		Yes	No		
Part IV Identification of Related Or line 34 because it had one or n									swered	d "Yes	" on Form	990,	Part	IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domici (state or fo country	e oreign	С	(d) Pirect control entity	(C co	(e) of entity rp, S corp, trust)	<b>(f)</b> Share of total Income		(g) e of end- year assets	of-Percer owne	itage		(i) Section 512 (b)(13) controlled entity?	
(1) M & J Robinson CRAT	Remdr Trust	TX		H.	ICF	Trust					_		L	Yes N	
5603 South Braeswood Blvd Houston, TX 77096 76-6103916	Kemui Hust					ITUSE									U
(2) Extremis Corporation  5603 South Braeswood Blvd Houston, TX 77096 76-0492189	Dormant	TX		H	ICF	C corp	)							N	o
															_

(5) Alan F & Diane R Levin Fd

Part V	Transactions With Related Organizations Complete if the organizatio	n answered "Yes" on For	m 990, Part IV, lın	e 34, 35b, or 36.			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
<b>1</b> During	the tax year, did the orgranization engage in any of the following transactions with one oi	r more related organizations	listed in Parts II-IV?				
a Rece	eipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
<b>b</b> Gıft,	grant, or capital contribution to related organization(s)				1b	Yes	
<b>c</b> Gıft,	grant, or capital contribution from related organization(s)				<b>1</b> c	Yes	
<b>d</b> Loar	ns or loan guarantees to or for related organization(s)				1d		No
<b>e</b> Loar	ns or loan guarantees by related organization(s)				1e		No
<b>f</b> Divid	dends from related organization(s)				1f		No
<b>g</b> Sale	of assets to related organization(s)				<b>1</b> g		No
<b>h</b> Purc	hase of assets from related organization(s)				1h		No
i Exch	ange of assets with related organization(s)				1i		No
j Leas	e of facilities, equipment, or other assets to related organization(s)				1j		No
							No
<b>k</b> Leas							
I Perfo	ormance of services or membership or fundraising solicitations for related organization(s	)			11		<u> </u>
<b>m</b> Perfo	rmance of services or membership or fundraising solicitations by related organization(s	)			1m		<u> </u>
<b>n</b> Sharı	ng of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
<b>o</b> Shar	ring of paid employees with related organization(s)				10	Yes	
<b>p</b> Reim	nbursement paid to related organization(s) for expenses				<b>1</b> p		No
<b>q</b> Reim	nbursement paid by related organization(s) for expenses				1q	Yes	
<b>r</b> Othe	er transfer of cash or property to related organization(s)				1r		No
	er transfer of cash or property from related organization(s)				1s		No
3 0 1110	ar cransfer of easil of property from related organization(3)						
2 If the	e answer to any of the above is "Yes," see the instructions for information on who must c	omplete this line, including	covered relationships	and transaction threshold	İs		
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount	ınvolved	i
(1) Houston	Jewish Community Fdn	b	1,138,781	. Cash			
(2) Houston	Jewish Community Fdn	С	2,519,189	Cash			
(3) Mary L &	William J Osher Fd	С	36,000	Cash			
(4) The Beck	ser Family Foundation	С	25,000	Cash			

10,000 Cash

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) (g) Share of total end-of-year assets			(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No	
												]	
												$\Box$	
	•												

Schedule R (Form 990) 2013

# Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

# **Additional Data**

**Software ID:** 13000170

Software Version: 2013v4.0

**EIN:** 74-1109654

Name: Jewish Federation of Greater Houston

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Identification of Rela	ıted Tax-Exempt Or≤	ganizations					,	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	<b>(f)</b> Direct controlling entity	Section (b)(1 contro	(g) Section 512 (b)(13) controlled entity?	
						Yes	No	
(1) Houston Jewish Community Fdn  5603 South Braeswood Blvd Houston, TX 77096 76-0187329	Support the Jewish Federation of Gr Hou	ТХ	501(c)(3)	509(a)(1)	Jewish Federation of Greater Houston	Yes		
(1) Mary L & William J Osher Fd  5603 South Braeswood Blvd Houston, TX 77096 20-5094518	Support the Jewish Federation of Gr Hou	ТХ	501(c)(3)	509(a)(3)I	Jewish Federation of Greater Houston	Yes		
(2) The Becker Family Foundation  5603 South Braeswood Blvd Houston, TX 77096 76-0560995	Support the Jewish Federation of Gr Hou	ТХ	501(c)(3)	509(a)(3)I	Jewish Federation of Greater Houston	Yes		
(3) Alan F & Diane R Levin Fd  5603 South Braeswood Blvd Houston, TX 77096 76-0613294	Support the Jewish Federation of Gr Hou	ТХ	501(c)(3)	509(a)(3)I	Jewish Federation of Greater Houston	Yes		
(4) The Rauch Foundation  5603 South Braeswood Blvd Houston, TX 77096 76-0300344	Support the Jewish Federation of Gr Hou	ТХ	501(c)(3)	509(a)(3)I	Jewish Federation of Greater Houston	Yes		
(5) The Samuels Foundation  5603 South Braeswood Blvd Houston, TX 77096 76-0207517	Support the Jewish Federation of Gr Hou	тх	501(c)(3)	509(a)(3) I	Jewish Federation of Greater Houston	Yes		
(6) Donald & Martha Kaplan Freedman Fd  5603 S Braeswood Blvd  Houston, TX 77096  45-5449056	Support the Houston Jewish Community Fd	тх	501(c)(3)	509(a)(3) I	Houston Jewish Community Foundation	Yes		