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DLN: 93492213006005

OMB No 1545-1150

Form 990-EZ

Department of the Treasury

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

**Short Form** 

▶ 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-EZ and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

**Open to Public** 

		ue Service								
		e 2013 calenda applicable	r year, or tax year beginning 10-01-2013	, and ending 0	9-30-201	4				
		change	C Name of organization Jewish Federation Association				D Employ	er iae	entification number	
	lame cl		of Connecticut Inc	O box, if mail is not delivered to street address) Room/suite						
	nıtıal re		40 Woodland Street	u to street address) Kt	bom/ suite		<b>E</b> Telephone number			
┌╷	emına	ted						(860)	727-5701	
┌	mende	d return	City or town, state or province, country, and ZIP or fore Hartford, CT 06105	eign postal code			<b>F</b> Group E Number		ion	
Δ	pplicati	on pending	Haldista, CT 00103				Number			
							<del></del>			
G A .	ccoun	ting Method	Cash  Accrual Other (specify) ►		н		If the     to attach	_	inization is <b>not</b>	
G A	ccoun	ting Method 1	Cash i Accidal Other (specify)		-		0,990-E			
I W	ebsite	www.jfact.org			_ [				•	
			only one)? 501(c)(3) 501(c)(4) ◀(insert no )		7					
			Corporation Trust Association Co		00.000		·	/	Dant III and laws	
			7b, to line 9 to determine gross receipts If gros 0 or more, file Form 990 instead of Form 990-E2		00,000 6	r more, or	ir total ass			
Pa	art I	Revenue	, Expenses, and Changes in Net Asse	ts or Fund Ba	lances	(see the in	structions	for P	'art I)	
	1		e organization used Schedule O to respond to ar						<u> </u>	
	1	Contributions	s, gifts, grants, and similar amounts received					1		
	2	Program serv	rice revenue including government fees and cont	racts				2	82,718	
	3	Membership	dues and assessments					3	80,100	
	4	Investment ır	ncome					4	113	
	5a	Gross amoun	t from sale of assets other than inventory		5a					
힂	ь	Less cost or	other basis and sales expenses		5b	,	0			
Revenue	С	Gain or (loss)	) from sale of assets other than inventory (Subtr	act line 5b from li	ne 5a)			5c		
Şe.	6	Gaming and fi	undraising events							
	a	Gross income	e from gamıng (attach Schedule G ıf greater than							
	b		e from fundraising events (not including \$ ing events reported on line 1) (attach Schedule		butions					
		sum of such g	gross income and contributions exceeds \$15,00	00)	6Ь		0			
	c	Less direct e	expenses from gaming and fundraising events		60		0			
	d	Net income o	or (loss) from gaming and fundraising events (add	d lines 6a and 6b a	and subtr	act line 6 c	)	6d		
	7a	Gross sales o	of inventory, less returns and allowances		7a					
	ь	Less cost of	goods sold		7b	1	0			
	С	Gross profit o	or (loss) from sales of inventory (Subtract line 7	b from line 7a)				7c		
	8	O ther revenu	ie (describe in Schedule O)					8		
	9	Total revenue	<b>e.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				▶	9	162,931	
	10	Grants and sı	ımılar amounts paıd (lıst ın Schedule O)					10	51,314	
	11	Benefits paid	to or for members					11	<u> </u>	
	12	Salaries, othe	er compensation, and employee benefits					12	97,575	
e V	13	Professional f	fees and other payments to independent contrac	ctors				13	6,189	
Expenses	14		rent, utilities, and maintenance					14	<u>.</u>	
Š	15		lications, postage, and shipping					15		
Ш	16		ses (describe in Schedule O)					16	10,502	
	17		A dd l 4 O 4b				•	17	165,580	
	18		eficit) for the year (Subtract line 17 from line 9)		· · ·	<u> </u>		18	-2,649	
etAssets		·	r fund balances at beginning of year (from line 27	7 column (A )) (m)	ist agree	with		10	2,079	
AS.	19			, , column (A )) (MC	ascagiee	VVICII			164 140	
솔			igure reported on prior year's return)					19	164,148	
Z	20	=	es in net assets or fund balances (explain in Sch	•				20		
	21	Net assets or	r fund balances at end of year Combine lines 18	tnrough 20 .			=	21	161,499	

Part II Balance Sheets (see the Check if the organization used		any question in this	Part II			
			<b>A)</b> Beginning of year		(B) End of year	
22 Cash, savings, and investments .			184,470	22	175,257	
23 Land and buildings				23	·	
24 Other assets (describe in Schedule O			662	24	662	
25 Total assets			185,132	25	175,919	
26 Total liabilities (describe in Schedule	0)		20,984	26	14,420	
27 Net assets or fund balances (line 27 of	f column (B) <b>must</b> agree w	th line 21)	164,148	27	161,499	
Part III Statement of Program Check if the organization use What is the organization's primary exempt To lobby for the protection and promotion	d Schedule O to respond to purpose? of the civil, economic, polit	any question in this	Part III	(c)	Expenses equired for section 501 (3) and 501(c)(4) ganizations and section 47(a)(1) trusts,	
and other people To provide training and I <u>Connecticut</u> Describe the organization's program service				op <sup>.</sup>	tional for others )	
measured by expenses In a clear and conbenefited, and other relevant information for	or each program title		·		1	
<b>28</b> Provision of training, living and resettle workshops, elderly assistance programs, other organizations in Connecticut						
(Grants \$ 82,078) If th	ıs amount ıncludes foreıgn	grants, check here	<b>►</b> ┌	28a	56,528	
29 To promote the protection and promotic and other people and direct expenses for t (Grants \$ 48,213) If th		rograms		29a		
30						
(Grants \$ ) If th	ıs amount ıncludes foreıgn	grants, check here	▶┌	30a		
<b>31</b> Other program services (describe in Sc (Grants \$ ) If th	hedule O ) is amount includes foreign	grants check here .	▶ ⊏	31a		
32 Total program service expenses (add lir				32		
Part IV List of Officers, Directors, Tru	stees, and Key Employees	(list each one even if not	compensated — see the in	structio	ons for Part IV)	
(a) Name and title	Check if the organization used Schedule O to respond to any question in this Part IV					
See Additional Data Table						

	instructions for Part V ) Check if the organization used Schedule O to respond to any question in this Part	٧		<u>୮</u>				
			Yes	No				
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No				
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	34		No				
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No				
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule C	35b		Νo				
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	Yes					
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No				
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 🕨 37a							
b	Did the organization file Form 1120-POL for this year?	37b		Νo				
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were							
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Νo				
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b							
39	Section 501(c)(7) organizations Enter							
а	Initiation fees and capital contributions included on line 9							
b	Gross receipts, included on line 9, for public use of club facilities 39b 0							
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under							
	section 4911 ▶, section 4912 ▶, section 4955 ▶							
b	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I							
C	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958							
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization							
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		Νo				
41	List the states with which a copy of this return is filed 🕨							
42a	The organization's books are in care of Robert J Fishman Telephone no							
	Located at • 40 Woodland Street Hartford, CT ZIP + 4	<u>0</u>	510523	27				
Ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No				
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	No No				
	If "Yes," enter the name of the foreign country 🕨							
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			1				
С	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c		Νo				
	If "Yes," enter the name of the foreign country 🕨							
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041?</b> Check here and enter the amount of tax-exempt interest received or accrued during the tax year			▶┌				
			Yes	No				
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		No				
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No				
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No				
	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? <i>If "No," provide an</i>			140				
-	explanation in Schedule O	44d		Νo				
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Νo				
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		No				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

Form 990-EZ (2	2013)						Page 4
						Yes	No
	ganızatıon engage, dırectly s for publıc office? If "Yes,"			pehalf of or in opposition to			No
	ection 501(c)(3) orga			-152		. 6	50
ar	ll section 501(c)(3) orga nd 51		•	•		s for ill	ies 50
C	neck if the organization use	d Schedule O to respond to	o any question in this I	Part VI	· · · ·	Yes	.l No
						165	110
	ganization engage in lobbyi complete Schedule C, Part 1		tion 501(h) election ir	effect during the tax year	? . <b>47</b>		
<b>48</b> Is the org	anızatıon a school as descr	ribed in section 170(b)(1)(	A)(11)? If "Yes," compl	ete Schedule E .	. 48		
<b>19a</b> Did the or	ganızatıon make any transf	ers to an exempt non-char	ritable related organiza	tion?	. 49a		
<b>b</b> If"Yes," v	was the related organization	a section 527 organization	on?		. 49b		
	this table for the organizati						
	s) who each received more	(b) A verage	(c) Reportable	(d) Health benefits,			l amount
(a) mame an	a title of each employee	hours per week devoted to position	compensation (Forms W-2/1099- MISC)	contributions to employee benefit plans, and deferred compensation	of othe		ensation
IONE							
<b>f</b> Total nu	mber of other employees pa	aid over \$100,000 .			<b>-</b>		
	this table for the organizati nsation from the organizatio			ractors who each received	more th	an \$10	0,000
(a	a) Name and business addre	ess of each independent co	ontractor	(b) Type of service	(c) (	ompen	sation
IONE							
<b>d</b> Total nu	mber of other independent of	contractors each receiving	over\$100,000				
	organization complete Scho mpt charitable trusts must i					⊏ vo	s∏No
Hollexel	mpt charitable trusts must	attach a completed Sched	ulea			, 16	<b>3</b>   140
	of perjury, I declare that I hav elief, it is true, correct, and c						
*	****			2015-08-01			
loro L	Signature of officer			Date			
I II.	Robert J Fishman Executive Direct Type or print name and title	or					
	Print/Type preparer's name Adam P Cohen	Preparer's signature	e Da	Cileck I II I Door	46319		
Paid	Firm's name Adam P Coh	en CPA LLC	I	self-employed   Pooc			
Preparer Jse Only	Fırm's address ► 81 South Ma	ın St Suite 9		Phone no (860) 521-	-6400		
		d, CT 061072405					

**Software ID:** 13000170

**Software Version:** 2013v4.0

**EIN:** 06-6002641

Name: Jewish Federation Association

of Connecticut Inc

#### Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Robert J Fishman Executive Direc	40 00	63,709		
Robert Lesser Chairman	5 0 0	0		
Robert Tendler Pres to 6/14	5 0 0	0		
Cary Lakenbach Treasurer	2 0 0	0		
Lindy Lee Gold Vice President	2 0 0	0		
Norman Greenstein Director	1 00	0		
Hon Jerry Wagner to914 Director	1 00	0		
Robert K Yass Past Chairman	1 00	0		
Howard Sovronsky Director fr6/14	1 00	0		
Rabbi Jon Haddon to 1214 Director	0	0		
Pam Ehrenkranz Director	1 00	0		
Sydney Perry Director	1 00	0		
Michael Price Director	1 00	0		
Jerry Fischer Director	1 00	0		
Milton Wallack Director	1 00	0		

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Catherine Fischer Schwartz Director to6/14	1 00	0		
Eric Albert President	1 00	0		
Steven Friedlander Director	1 00	0		
Lisa Miller fr 714 Director	1 00	0		
Gary Jones Director	1 00	0		
Martın C Shapıro Dırector	1 00	0		
Dr Jon Levy Director	1 00	0		
James Cohen fr 414 Director	1 00	0		
Judy Singer to 614 Director	1 00	0		
Alan Stein Director	1 00	0		
Rabbı Josh Ratner Dırector	1 00	0		
Jason Newman Past Treasurer	1 00	0		
Laura Zimmerman Director	1 00	0		
Laurie Lowell to 1213 Director	1 00	0		
David Brandwein fr 614 Director	1 00	0		

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Arlene Elovich to 614 Vice President	1 00	0		
Rabbi Eric Polokoff Director	1 00	0		
Romana Strochlitz Primus Director	1 00	0		
Edward Rosenblatt Secretary	1 00	0		
Shoshana Dweck Director	1 00	0		
Steve Wendell to 614 Director	1 00	0		
David Baram Director	1 00	0		
Seth Feigenbaum to 614 Director	1 00	0		
Kenneth Lesser Dırector	1 00	0		
Allan Hillman Director	1 00	0		
Nancy Mimoun Director	1 00	0		
David Kweskin to 1213 Director	1 00	0		
Laurie Kilchevsky Director	1 00	0		
Lisa Fishman from 714 Director	1 00	0		

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DLN: 93492213006005

### 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

<b>◆</b> S If the	Section 501(c)(3) organizations the organization answered "Yes	nat have filed Form 5768 (election unden nat have NOT filed Form 5768 (election s'' to Form 990, Part IV, Line 5 (Pro	under section 50	1(h)) Complete Part II-B	Do not complete Part II-A
	Section 501(c)(4), (5), or (6) orga	inizations Complete Part III		F	
Jew	me of the organization rish Federation Association			Employer Id	entification number
	Connecticut Inc			06-600264	
Par	Complete if the or	ganization is exempt under s	section 501(c	) or is a section 52	27 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign activ	vities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Dar	t I-B Complete if the or	ganization is exempt under s	section 501/c	1(3)	
1		e tax incurred by the organization und		<u>/(3).</u>	ф
2	•	e tax incurred by organization manage		4055	<b>≯</b>
3	•			4900 <b>F</b>	→
		ection 4955 tax, did it file Form 472	o for this year?		<u> </u>
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV	ganization is exempt under s	estion FO1/s	\ avecant coetion [	:01(a)(2)
	•		<u> </u>	•	
1		ended by the filing organization for sec	•		\$
2	exempt function activities	rganization's funds contributed to oth	ner organizations	for section 52/	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	nd on Form 1120	)-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			☐ Yes
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	amount paid fror rectly delivered t	n the filing organization o a separate political or	s funds Also enter the ganızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -(	contributions received
				1	

3	(The term "expenditures" means	o an affiliated group (and obying expenditures) oox A and "limited contro <b>Expenditures</b>	list in Part IV eacl	n affiliated grou		•			
3	Check If the filing organization belongs to expenses, and share of excess lole that the filing organization checked be belonged to the company of the term "expenditures" means the company of the compan	obying expenditures) ox A and "limited contro <b>Expenditures</b>		_	up member's nam	e, address, EIN,			
	Check Frifthe filing organization checked be Limits on Lobbying (The term "expenditures" means	Expenditures	l" provisions apply	_					
	(The term "expenditures" means								
		Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)							
La	Total lobbying expenditures to influence public	opinion (grass roots lob	byıng)						
b	Total lobbying expenditures to influence a legis	slative body (direct lobby	/ıng)						
c	Total lobbying expenditures (add lines 1a and	1b)							
d	O ther exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines	1c and 1d)							
f	Lobbying nontaxable amount Enter the amoun columns	t from the following table	ın both						
	If the amount on line 1e, column (a) or (b) is:	The lobbying 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 plus 15% of the	e excess over \$500,000						
	Over \$1,000,000 but not over \$1,500,000	00							
	Over \$1,500,000 but not over \$17,000,000	0							
	Over \$17,000,000	\$1,000,000							
g	Grassroots nontaxable amount (enter 25% of l	ıne 1f)							
h	Subtract line 1g from line 1a If zero or less, er	nter-0-							
i	Subtract line 1f from line 1c If zero or less, en	ter - 0 -							
j	If there is an amount other than zero on either section 4911 tax for this year?	line 1h or line 1ı, did the	organization file Fo	orm 4720 repo	rting	┌ Yes ┌ No			
	(Some organizations that made a columns below. See	the instructions fo	ection do not h r lines 2a thro	ave to com ugh 2f on p		ne five			
	Lobbying Ex	penditures During	4-Year Averag	ing Period	1	<u> </u>			
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> Total			
2a	Lobbying nontaxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots nontaxable amount								

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

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).		(8	.,		(b)
	r each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lob tivity.	bying -	Yes	No		nount
1 a	legislation, including any attempt to influence public opinion on a legislative matter or refer through the use of  Volunteers?	endum,				
b c		11)?				
d		F				
e						
f	f Grants to other organizations for lobbying purposes?	_				
g	g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h i						
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	·				
b						
C	, , , ,	2				
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	art III-A Complete if the organization is exempt under section 501(c)(4 501(c)(6).	l), section 5	501(c	)(5), c	r sec	tion
					Y	'es No
1	Were substantially all (90% or more) dues received nondeductible by members?				<b>1</b> Y	es
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	No
3	3 3 7 7 1 1				3	No
Pai	The state of the organization is exempt under section 501(c)(4) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are a 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 expenses for which the section 527(f) tax was paid).	of political				
a	,		2a			
b			2b			
C	- 1	(a) duas	2c 3			
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion does the organization agree to carryover to the reasonable estimate of nondeductible lobby	of the excess				
5	political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		5			
	Part IV Supplemental Information					
Pro	rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A art II-B, line 1 Also, complete this part for any additional information	(affiliated grou	ıp lıst),	Part II	-A, line	e 2, and
	Return Reference Explanation					
	l l					

	<u>-</u>
Part IV Supplemental Inf	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93492213006005

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (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 Association of Connecticut Inc									Employer identification number						
Part I Exce	ess Benef					3) and section			organı	zatıor			4.01		
	e of disqual					00, Part IV, line n disqualified	25	(c) Desc					<u>40b</u> (d) Co	rract	-od2
<b>1 (a)</b> Nam	e oi uisquai	illeu	person (		n and organ			(C) Desi	TIPLION	UI LI a	iisactioi	' ⊦	Yes	$\overline{}$	lo
														- -	
														- -	
4958 .						disqualified per			he year	r unde	<b>F</b> \$	n			
<b>3</b> Enterthe a	amount of ta	ix, if	any, on line	2, above, re	eimbursed b	y the organizati	ıon				<b>F</b> \$				
Part III Lo	ans to ar	nd/d	or From I	ntereste	d Persons										
						990-EZ, Part V	/ , In	ne 38a, or	Form 9	90, Pa	art IV , lı	ne 26,	or if the	<u>!</u>	
org	janization re	port	ed an amou	nt on Form 9	990, Part X,	, line 5, 6, or 22						-			
(a) Name of (interested person with organ		loan		(d) Loan to or from the organization	e	principal		f)Balance due	(g) In default?		(h) Approved by board or		(i)W agree		
											commi	ttee?			
				То	From				Yes	No	Yes	No	Yes	Т	No
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	anto ou A	coic		- ofitting	Tetorosta	nd Dorsons									
						e <b>d Persons.</b> n Form 990, Pa	art	TV line 3	7						
(a) Name of ir		_	) Relationsh			int of assistance	_	(d) Type		ıctano	a (a	) Purpo:	se of as	cict	ance
perso			erested pers organiza	son and the	(c) Amou	ant of assistante		<b>(4)</b> 1 y p c	. 01 433	istanc		<b>)</b> 1 dipo.	30 01 03	3130	ance
(1) Jewish Feder Hartford	ation Gr	Mem	nber federat	ion		9,19	5 5	Subgrantee	state	grants	Cıt	ızenshıp	tra		
(2) Jewish Feder New Haven	ation Gr	Men	nber federat	ion		16,14	3 9	Subgrante	2		Eld	erly svo	:s		
(3) Jewish Fam S Greenwich	Svcs	Men	nber federat	ion		4,15	6 5	Subgrante	e s		Cıt	ızenshıp	tra		
(4) Jewish Feder NH	ation Gr	Men	nber federat	ion		3,11	.7	Subgrantee	- <del></del>		Cıt	ızenshıp	tra		
							_				•				

Part IV Business Transactions Involving Interested Persons.						
Complete if the organization	<u>n answered "Yes" on F</u>	Form 990, Part IV, lin	e 28a, 28b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	

## Part V Supplemental Information

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

Return Reference	Explanation
Schedule L, Part V Supplemental	The nine member Jewish federations appoint directors to the JFACT Board of Directors The
Information	Federations are participating subgrantees of state and federal grants

Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93492213006005

OMB No 1545-0047

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# Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

**SCHEDULE 0** 

(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 Association of Connecticut Inc

Employer identification number

06-6002641

### 990 Schedule O. Supplemental Information

Return Reference	Explanation		
Grants and Similar Amounts Paid In Excess of \$5,000 4			
Grants and Similar Amounts Paid In Excess of \$5,000 5	Class of Activity Social services   Donee's Name Jewish Fed Gr New Haven   Donee's Addres s 360 Amity Road Woodbridge, CT 06525   Relationship of Donee Member federation   Cash A mount Given \$19260		
Grants and Similar Amounts Paid in Excess of \$5,000 7	Class of Activity Social services   Donee's Name CT Coalition Mutual Asst Assocs   Donee 's Address 143 Madison Avenue Hartford, CT 06106   Relationship of Donee None   Cash Amo unt Given \$7274		
Grants and Similar Amounts Paid In Excess of \$5,000 9	Class of Activity Social services   Donee's Name Center for Urban Research Education   Donee's Address PO Box 320536 Hartford, CT 06132   Relationship of Donee None   Cash Amount Given \$5195		
Other Expenses 1002	Office Expenses \$3472		
Other Expenses 1007	Conferences, Conventions, and Meetings \$2702		
Other Expenses 1012	Insurance \$2224		
Other Expenses 1	Dues and subscriptions \$1166		
Other Expenses 2	Publicity and lobbying \$651		
Other Expenses 3	Program expenses \$214		
Other Expenses 4	Intern \$73		
Other Assets 1	Due from JFACT Fund - Beginning \$662 Due from JFACT Fund - Ending \$662		
Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$7265 Accounts Payable and Accrued Expenses - Ending \$2001		
Total Liabilities 1	Due to Jewish Fed of Gr Hartford - Beginning \$7565 Due to Jewish Fed of Gr Hartford - Ending \$0		
Total Liabilities 2	Deferred revenue - government grants - Beginning \$6154 Deferred revenue - government grants - Ending \$12419		
Part IX, Lines 16 - Occupancy and 14 - Information Technology	JFACT receives an in-kind contribution of substantially all of its occupancy costs, including rent, utilities, computer and telephone services. The estimated value of these services, \$21,000, is excluded from Occupancy Expenses on Line 16 and Contributions, in accordance with the instructions for Form 990. The same amount is included in income and expenses in the organization's financial statements, in accordance with generally accepted accounting principles.		
Part I, Line 5, Part V, 2a - Employees	JFACT pays its employees through a common paymaster arrangement. The related organization issues all W-2s for JFACT's two employees. JFACT and it supporting organization allocate payroll and related benefits.		