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EXTENDED TO NOVEMBER 16, 2015

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990. Open to Public Inspection

OMB No 1545-0047

A F	or th	e 20 <u>14 calendar year, or tax year beginning</u> and e	ending		
В	heck if pplicab	C Name of organization		D Employer iden	tification number
	Addre	PARTNERS IN TORAH, INC.			
F	Name			20-	-8908428
Ē	Initial return		Room/suite	E Telephone num	
	Final	15751 TINCOLN DR	100111700110	•	3-557-6750
	termir			G Gross receipts \$	1,025,324.
	Amen	ded COMMETET NAT 40076		H(a) Is this a group	
	Application	F Name and address of principal officer ARTHUR A. WEISS	-	for subordina	() (-)
	pendi	$^{\circ}$ $ $ 27777 FRANKLIN ROAD, SUITE 2500, SOUTHF	TELD,	H(b) Are all subordinate	
1 1	ax-ex	empt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	r 527	If "No," attacl	n a list (see instructions)
JV	Vebsi	te: ▶ N/A		H(c) Group exemp	otion number
KF	orm o	organization: X Corporation Trust Association Other	L Year	of formation: 2007	M State of legal domicile; MI
Pa	ırt I	Summary			
Φ	1	Briefly describe the organization's mission or most significant activities EXCLU	JSIVEL	Y AS A SUF	PORT
Governance		ORGANIZATION OF YESHIVATH BETH YEHUDAH			
ř	2	Check this box 🕨 📖 if the organization discontinued its operations or dispose	ed of more	than 25% of its net	t așsets.
Ŏ	3	Number of voting members of the governing body (Part VI, line 1a)			з 6
8	4	Number of independent voting members of the governing body (Part VI, line 1b)		L	4 6
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		<u> </u>	5 0
Activities	6	Total number of volunteers (estimate if necessary)		<u> </u>	6 0
Act	!	Total unrelated business revenue from Part VIII, column (C), line 12			7a 0.
_	b	Net unrelated business taxable income from Form 990-T, line 34			7b 0.
				Prior Year	Current Year
Re		Contributions and grants (Part VIII, line 1h)		811,000	
Revenue	ł	Program service revenue (Part VIII, line 2g)			0.
æ	l	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		98,260	
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-		0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		909,260	
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	538,647	
	l	Benefits paid to or for members (Part IX, column (A), line 4)			0.
Expenses	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)			0.
ben	l		0.	<u> </u>	/ ·
ᅑ	l	Other expenses (Part IX, column (A), lines 1 13-7110, 111-24e)	<u> </u>	24,478	24,760.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line (25)	-	563,125	
		Revenue less expenses Subtract line 18 from line 12		346,135	
es es	5		Re	ginning of Current Yea	
Assets or Balances	20	Total assets (Part X, line 16)	50	2,540,941	
Ass	l	Total liabilities (Part X, line 26)			0.
Ę,Ę	22	Net assets or fund balances Subtract line 21 from line 20 = N, UT		2,540,941	
Pa	irt II	Signature Block			
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best o	f my knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of while			1. 1
		X mo		\. 1	1/16/18
Sigi	1	Signature of officer		Date∕	
Her		ARTHUR A. WEISS, SECRETARY AND TRUSTEE	3		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		RAYMOND J. GHERSI	1	1/09/15 setf-em	
Prep	arer	Firm's name BERGER, GHERSI & LABUKE PLC		Firm's EIN	38-2517534
Use	Only	Firm's address 300 EAST LONG LAKE ROAD STE 135			
		BLOOMFIELD HILLS, MI 48304-2374		Phone no. (248)333-3680
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	n 990 (2014) PARTNERS II	N TORAH, INC.	<u>20-8908</u>	3428 Page 2
Pa	rt III Statement of Program Service			
	Check if Schedule O contains a response	or note to any line in this Part III		<u> </u>
1	Briefly describe the organization's mission: TO PROVIDE SUPPORT TO YI	RSHTVATH BRTH VEU	TIDAH'E ADITE PRINCATION	DDOGD AM
	TO TROVIDE BOTTORY TO THE	SOULVAIN DEIN 1EN	ODAH S ADOUT EDUCATION	PROGRAM
2	Did the organization undertake any significant p	program services during the year	which were not listed on	
	the prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services on Sched	lule O.		
3	Did the organization cease conducting, or make		nducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule (
4	Describe the organization's program service ac			
	Section 501(c)(3) and 501(c)(4) organizations ar		f grants and allocations to others, the total exp	penses, and
	revenue, if any, for each program service report	.ed.	772,757.) (Revenue \$	
4a	(Code:) (Expenses \$/7/2, ADULT EDUCATION	, / 3 / • Including grants of \$	//2,/5/•) (Revenue \$)
	ADOLI EDUCATION			
				
				·····
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
		<u></u>		
			·	
				
		····		
				
4c	(Code.) (Expenses \$	in obtaining security of C) (Revenue \$	
70	(Code / (Expenses \$	including grants of \$) (Hevenue 5	··································

4d	Other program services (Describe in Schedule O).)		
		grants of \$) (Revenue \$	<u></u>
4e	Total program service expenses	772,757.		
				Form 990 (2014)

Part IV Checklist of Required Schedules

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X 1 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or Indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or 5 similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X 9 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 Х 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D. Part VI X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c 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 _____ e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X 14b 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 X 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 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, dld the organization attach a copy of its audited financial statements to this return? 20b

Form 990 (2014) PARTNERS IN TORAH, INC.
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	li		
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filling thresholds, conditions, and exceptions):			İ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-00		
VI.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	 		
UL	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II. III. or IV. and	 " -		
54	Part V, line 1	24	X	
250	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34_ 35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	30a		_A
u	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	254		
00	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		├─
				_~
	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36_	<u> </u>	X
	· · · · · · · · · · · · · · · · · · ·			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37_		<u> </u>
38			v]
	Note. All Form 990 filers are required to complete Schedule O	38_	X	(0044)

	Check if Schedule O contains a response or note to any line in this Part V			
		********	Voc	No
1a	Enter the number reported in Box 3 of Form 1096. Enter & if not applicable 1a 0		165	140
b				
С	Old the state of t			
	(gambling) winnings to prize winners?	1c		
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 return2a0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	milities and the first transfer of the company of t	3a		Х
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		
4a	At all the attention to the state of the sta			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	1		
5a		5а		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C		5c		
ва		1	- 1	ĺ
	any contributions that were not tax deductible as charitable contributions?	ва		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	65		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	_		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	X
D	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7Ь		
C	to file Form 8282?	7c		X
d	when at 12 to the country of France 2000 (but designed by country)	10		-
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9ь		
10	Section 501(c)(7) organizations. Enter:			ĺ
а	Initiation fees and capital contributions included on Part VIII, line 12		ļ	l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 601(c)(12) organizations. Enter:	.		1
а	Gross income from members or shareholders		1	1
b	Gross income from other sources (Do not net amounts due or pald to other sources against			1
	amounts due or received from them)	. 1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		\longrightarrow	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		İ	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans			
1/10	The state of the s	1/2	 	X
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		<u> </u>
	11 165, Title It mode at onthis to to posit those payments in Try, provide an explanation in Scriedine O	140	 -	

	1990 (2014) PARTNERS IN TORAH, INC. 20-89	08428	P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and fo	ra "No" r	еѕроп	26
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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	6		
	If there are material differences in voting rights among members of the governing body, or if the governing	7		1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			1
b		6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	х	1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	Did the organization have members or stockholders?	6		X
7a		· —		
	more members of the governing body?	7a	- 1	х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	, ra		
-	persons other than the governing body?	76		v
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		X
•			v	
a	The governing body? Each committee with authority to act on behalf of the governing body?	1]	X	
ь		8b	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			77
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		<u>X</u> _
Sec	don b. Policies (mis section a requests information about policies not required by the internal revenue Code.)		· · ·	
40-	Did the organization have local chapters, branches, or affiliates?	40-	Yes	No
10a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a	—-	<u>X</u>
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	405		
44-		. 10b	Х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11 <u>a</u>		
12a	miles the second of the second	12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	··	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	· 120		
C		40-	\mathbf{x}	
12	Did the organization have a written whistleblower policy?			X
13	Did the organization have a written document retention and destruction policy?			X
14	Did the process for determining compensation of the following persons include a review and approval by independent	14	-+	
15	· · · · · · · · · · · · · · · · · · ·			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ا ۔ ا		W-
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
10a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		i	
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1 1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u>C</u>	exempt status with respect to such arrangements?	. 16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only	/) availabl	e	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website W Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	ina tinano	ial	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	ARTHUR A. WEISS - 248-351-3000			
	27777 FRANKLIN ROAD, SUITE 2500, SOUTHFIELD, MI 48034			

Form 990 (2014) PARTNERS	דאן ייסד	ΔH		TN	·C -				20-8908	428 Page 7
Part VII Compensation of Officers,	Directors.	Γru	ste	<u>==\</u> es.	Ke	νE	mp	lovees. Highest C	ompensated	#AU Fage
Employees, and Independe				,		, –		,,		
Check if Schedule O contains a resp				e in	this	Par	t VII			
Section A. Officers, Directors, Trustees, Key	Employees, a	ind	High	nest	Co	mpe	nsa	ted Employees		
1a Complete this table for all persons required t									with or within the orga	nization's tax year
List all of the organization's current officer Enter -0- in columns (D), (E), and (F) if no compen List all of the organization's current key er List the organization's five current highest cable compensation (Box 5 of Form W-2 and/or	isation was pai nployees, if an compensated e ox 7 of Form 1	ld. y. S emp 099	ee ir loye -MIS	nstru es (d SC) d	uctio othe of m	ns for the	or de in ar han	efinition of "key employe n officer, director, truste \$100,000 from the orga	ee." e, or key employee) w anzation and any relati	no received reported organizations.
 List all of the organization's former officers reportable compensation from the organization a List all of the organization's former director more than \$10,000 of reportable compensation to List persons in the following order: individual trust and former such persons. 	and any related ors or trustees from the organi stees or directo	l org tha zati ors;	at red on a insti	atio ceive nd a tutic	ns. ed, i any i onal	n the relat trust	ed o	pacity as a former direc organizations. ; officers; key employee	tor or trustee of the or	ganization,
Check this box if neither the organization r	or any related	org	anıza	atior	n co	mpe	nsat	ted any current officer, o	irector, or trustee.	
(A) Name and Title	(B) Average hours per week	off	Po: do not check ox, unless p		(C) Position seck more than one person is both an a director/trustee)		lh an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	institutional irristee	Officer	Key emplayee	Highest compensated employee	former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DOV LOKETCH	0.20				Γ				-	
CHAIRMAN PRESIDENT AND TR		X		X				0.	0.	0.
(2) GARY TORGOW	0.20						ļ			
TREASURER AND TRUSTEE		X	ļ	X	_	╙	<u> </u>	0.	0.	0.
(3) ARTHUR A. WEISS	0.20	1		l					_	_
SECRETARY AND TRUSTEE		X	_	X	<u> </u>	ļ	_	0.	0.	0.
(4) LAWRENCE WOLFE	0.20	ł	ļ							
TRUSTBE		X	├	ļ	├-	_	┝	0.	0.	0.
(5) MAX BERLIN	0.20	x							_	•
TRUSTEE		Δ.						0.	0.	0.
					_					
	į į		Į l	l	İ	1				

Form 990 (2014) PARTNER:	S IN TOR	<u>AH</u>	,	IN	<u>c.</u>				20-890	842	8 1	Page 8
Part VII Section A. Officers, Directors, Tr	ıstees, Key Em	ıploy	/ees	s, an	d H	ighe	st C	Compensated Employe	es (continued)			
(A) Name and title	(B) Average hours per week	offi	(C) Position onot check more than one x, unless person is both ar ficer and a director/trustee)			than	ih an	(D) Reportable compensation from	(E) Reportable compensation from related	- 1	(F) Estima amoun othe	ted t of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	o.	mpens from the rganiza and rela ganiza	he ation ated
	-											
						1				+		
		_		-	-	\vdash	\vdash			+-		
		-	┢	<u> </u>		<u> </u>	-			+		
		_	<u> </u>		_	_						
		{										
			-		\vdash		-			+		
1b Sub-total	1		<u></u>				<u> </u>	0.	0	 		0.
c Total from continuation sheets to Part V	/II, Section A						>	0.	0	•		0.
d Total (add lines 1b and 1c)								0. eceived more than \$100				0.
compensation from the organization											Yes	No
3 Did the organization list any former office											1.00	
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the s	um of reportab	le co	mp	ensa	ation	and	d oth	ner compensation from t	he organization		-	X
and related organizations greater than \$19 5 Did any person listed on line 1a receive or	50,000? <i>If "Yes,</i> accuse compe	" <i>COI</i> neati	mple on f	ete S	anv.	duk	J fo	or such individual	dual for centions	. 4	 	X
rendered to the organization? If "Yes," con										5		x
Section B. Independent Contractors 1 Complete this table for your five highest c	ompensated inc	depe	nde	nt c	ontr	acto	rs th	hat received more than	\$100,000 of compe	nsatior	from	
the organization. Report compensation fo	r the calendar y	ear e	ndi	ng w	/ith c	or w	<u>rthin</u>		ear		<u> </u>	
(A) Name and busines	s address	NC	NE	<u> </u>				(B) Description of s	ervices		(C) ensatio	on
							\dashv					
							\dashv					
							\dashv					
Total number of independent contractors \$100,000 of compensation from the organ		ot lin	nited	d to	thos C		ted	above) who received m	ore than			
420000										Form	990	(2014)

Page 8

432008 11-07-14

406,183

Total revenue. See instructions.

432009 11-07-14 106,511.

0.

49,672.

Form 990 (2014)

	Check if Schedule O contains a respons				<u>.</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	772,757.	772,757.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				·
4	Benefits paid to or for members				·
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified			ļ	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(8)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
8	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		·		
f	Investment management fees	24,081.		24,081.	
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				-
17	Travel				
18	Payments of travel or entertainment expenses	1			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	FOREIGN TAXES	679.		679.	
b					
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	797,517.	772,757.	24,760.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	}			
	Check here tf following SOP 98-2 (ASC 958-720)			İ	

PARTNERS IN TORAH, INC. Form 990 (2014) 20-8908428 Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X ... Beginning of year End of year Cash - non-interest-bearing 1 277,401 159,451. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr). Complete Part II of Sch L Assets Notes and loans receivable, net _____ 7 Inventories for sale or use ________ Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 11 2,263,540. 2,131,274. 12 12 Investments · program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 2.540.941 2,290,725. 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond fiabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 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 25 0. 0 -Total liabilities, Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 Temporarily restricted net assets 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 0 30

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

2,290,725. Form 990 (2014)

2,290,725.

2,290,725.

0.

2,540,941.

2,540,941.

2,540,941

31

32

33

31

32

33

	1990 (2014) PARTNERS IN TORAH, INC.	20-	8908	428	Page 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				🗀
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>,183.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		797	,517.
3	Revenue less expenses. Subtract line 2 from line 1	3		-391	,334.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	,540	,941.
5	Net unrealized gains (losses) on investments	5		141	,118.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2	<u>,290</u>	<u>,725.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
	[]			Y	es No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.		- 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•••		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		Ì	
	separate basis, consolidated basis, or both:]		
	Separate basis Consolidated basis Both consolidated and separate basis			1	
þ	Were the organization's financial statements audited by an independent accountant?			2b	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis	,	- 1	
	consolidated basis, or both:			- 1	
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	ł
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the		,	!	1
	review, or compilation of its financial statements and selection of an independent accountant?			2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			ĺ	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Au	dit		
	Act and OMB Circular A-133?			3a	<u> X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	
				Form 9	90 (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

Employer identification number Name of the organization PARTNERS IN TORAH, 20-8908428 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 L section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. X Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (III) Type of organization (II) EIN (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-9 listed in your organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes (see instructions)) YESHIVATH BETH 38-1437939501(C)(3) 772,757 YEHUDAH

Schedule A (Form 990 or 990-EZ) 2014						
Part II Support Schedule for	Organization	s Described in	Sections 170	(b)(1)(A)(iv) a	nd 170(b)(1)(A)(Page 2
(Complete only if you check	ed the box on line	5, 7, or 8 of Part I	or if the organization	on failed to qualif	v under Part III. If the	e organization
fails to qualify under the test	ts listed below, ple	ase complete Part	III.)	•	,	· G · · - · · · · · · · · · · · · · · ·
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				15,500	(6) 25 1	TI TOTAL
2 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3 5 The portion of total contributions						
by each person (other than a governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
6 Public support, Subtract line 5 from line 4,	<u> </u>					
Section B. Total Support	· · · · · · · · · · · · · · · · · · ·		T			
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on					}	
securities loans, rents, royalties		1				
and income from similar sources						
9 Net income from unrelated business activities, whether or not the	i					
business is regularly carried on						
10 Other income. Do not include gain						<u> </u>
or loss from the sale of capital						
assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10				·		
12 Gross receipts from related activities,		ons)		· · · · · · · · · · · · · · · · · · ·	12	
13 First five years. If the Form 990 is for	•	*				
organization, check this box and stor		· · · · · · · · · · · · · · · · · · ·		-		. ▶□
Section C. Computation of Publ	ic Support Pe	rcentage			***************************************	
14 Public support percentage for 2014 (ine 6, column (f) d	lvided by line 11, c	olumn (f))		14	%
15 Public support percentage from 2013					15	%
16a 33 1/3% support test - 2014. If the o	organization did no				more, check this bo	
stop here. The organization qualifies		-				▶□
b 33 1/3% support test - 2013. If the c				line 15 Is 33 1/39	% or more, check th	xod sır
and stop here. The organization qual						▶□
17a 10% -facts-and-circumstances tes	t - 2014. If the org	anization did not c	heck a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,

Schedule A (Form 990 or 990-EZ) 2014

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

	qualify under the tests listed b			nganteation laneu (o quality under re	art II. II ti 19 Organize	tion lais to
Secti	on A. Public Support	below, please com	piete Fait II)				
Calenda	ar year (or fiscal year beginning in) ►	(a) 2010	(ь) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
m	ifts, grants, contributions, and embership fees received. (Do not iclude any "unusual grants.")						
2 G m fo ar	ross receipts from admissions, ierchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the rganization's tax-exempt purpose						
ar	ross receipts from activities that re not an unrelated trade or bus- ess under section 513						
iza	ax revenues levied for the organ- ation's benefit and either paid to r expended on its behalf						
•	ne value of services or facilities imished by a governmental unit to						
	ne organization without charge otal. Add lines 1 through 5						
	mounts included on lines 1, 2, and received from disqualified persons						
fro	nounts included on lines 2 and 3 received on other than disqualified persons that ceed the greater of \$5,000 or 1% of the nount on line 13 for the year						
c A	dd lines 7a and 7b						
	ublic support (Subtract line 7c from line 6) on B. Total Support						
Calenda	ar year (or fiscal year beginning in)	(a) 2010	(ь) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Ar 10a Gi di 86	mounts from line 6						
(le	nrelated business taxable Income ess section 511 taxes) from businesses equired after June 30, 1975						
11 No ac wi	dd lines 10a and 10b						
12 Or or	ther income. Do not include gain loss from the sale of capital sets (Explain in Part VI.)						
13 To	otal support. (Add lines 9, 10c, 11, and 12)		<u></u>	<u></u>		<u> </u>	
	irst five years. If the Form 990 is for neck this box and stop here	r the organization's	s first, second, thir			n 501(c)(3) organiz	ation,
	on C. Computation of Publ	ic Support Pe	rcentage	······································			<u>P</u>
	ublic support percentage for 2014 (column (fl)		15	%
	ublic support percentage from 2013					16	<u>%</u>
	on D. Computation of Inves					· · · · · · · · · · · · · · · · · · ·	
	vestment income percentage for 20			e 13. column (fi)		17	%
	vestment income percentage from					18	%
	3 1/3% support tests - 2014. If the						
	ore than 33 1/3%, check this box a						
b 33	3 1/3% support tests - 2013. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%, a	and
	ne 18 is not more than 33 1/3%, che						
20 Pr	rivate foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	is box and see in	structions	.

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D. and complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)			
Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			}
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	X	— —
2	Did the organization have any supported organization that does not have an IRS determination of status			1
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	1		l
	organization was described in section 509(a)(1) or (2).	2		X
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	ł		
	(b) and (c) below.	3a		X
þ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	1		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	İ		
	organization made the determination.	3b		·
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			l
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		<u> </u>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	l.		
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		X
þ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign		İ	t
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			ĺ
	despite being controlled or supervised by or in connection with its supported organizations.	4b		<u> </u>
C	Did the organization support any foreign supported organization that does not have an IRS determination			1
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			l
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			l
	purposes.	4c_		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			1
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		· '	
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			1
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	F-		x
_	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	55		
	designated in the organization's organizing document?	5 <u>b</u> 5c	 	
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	30		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class			1
	benefited by one or more of its supported organizations; or (c) other supporting organizations that also			İ
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		ĺ	
		6	}	X
_	Part VI. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial	-	 	13
7	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent		ļ	
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		Х
_	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	<u> </u>	 	
8	If "Yes," complete Part I of Schedule L (Form 990).	8	1	X
0-	Was the organization controlled directly or indirectly at any time during the tax year by one or more	1	İ	
94	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	1	Ì	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		Х
	Did one or more disqualified persons (as defined in fine 9(a)) hold a controlling interest in any entity in which	<u> </u>	 	<u> </u>
D	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		Х
_	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			<u> </u>
C	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	1	X
10-	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)		 	_
iva	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting		1	
	organizations)? If "Yes," answer (b) below.	10a	1	X
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		<u> </u>	
	determine whether the organization had excess business holdings.)	10b		

	dule A (Form 990 or 990-EZ) 2014 PARTNERS IN TORAH, INC. 2 It IV Supporting Organizations (continued)	0-89084	<u> 28 p</u>	age 5
L		·	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1		
a	below, the governing body of a supported organization?	1 440	1	x
	, , , , , , , , , , , , , , , , , , , ,	11a		
	A family member of a person described in (a) above?	11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	<u> </u>
Sec	tion B. Type I Supporting Organizations		1	Т
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	j	1	1
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1	1	}
	controlled the organization's activities. If the organization had more than one supported organization,		ł	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		L
2	Did the organization operate for the benefit of any supported organization other than the supported			T
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			i
	supervised, or controlled the supporting organization.	2	ŀ	1
800	tion C. Type II Supporting Organizations			ــــــــــــــــــــــــــــــــــــــ
360	tion o. Type it dupporting organizations		Tv	T _N
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed		1	-
	the supported organization(s).	1_		<u> </u>
Sec	tion D. Type III Supporting Organizations		_,	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	j		
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			ı
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_	X	<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	x	1
3	By reason of the relationship described in (2), did the organization's supported organizations have a			\vdash
Ū	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	x	
800	tion E. Type III Functionally-Integrated Supporting Organizations		1 22	٠
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instru	etions):		
а	The organization satisfied the Activities Test. Complete line 2 below.			
ь	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then In Part VI Identity			1
	those supported organizations and explain how these activities directly furthered their exempt purposes,		1	1
	how the organization was responsive to those supported organizations, and how the organization determined			1
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	[1	
	reasons for the organization's position that its supported organization(s) would have engaged in these	Į		
		AL		
_	activities but for the organization's involvement.	<u>2b</u>		+
3	Parent of Supported Organizations. Answer (a) and (b) below.]
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	┥—	-
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		1	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		<u> </u>
	Schodulo A /	·	ET	0044

• •

	edule A (Form 990 or 990-EZ) 2014 PARTNERS IN TORAH, INC.			-8908428 Page 6
Ц	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying			ons. All
	other Type III non-functionally integrated supporting organizations must con	mplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	61,864.	106,511.
2	Recoverles of prior-year distributions	2	0.	0.
3	Other gross income (see instructions)	3	0.	0.
_4	Add lines 1 through 3	4	61,864.	106,511.
_5	Depreciation and depletion	5	0.	0.
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	0.	0.
_7	Other expenses (see instructions)	7	0.	0.
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	61,864.	106,511.
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a	1,536,668.	2,197,407.
	Average monthly cash balances	1b	138,700.	218,400.
С	Fair market value of other non-exempt-use assets	1c	0.	0.
ď	Total (add lines 1a, 1b, and 1c)	1d	1,675,368.	2,415,807.
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition Indebtedness applicable to non-exempt-use assets	2	0.	0.
3	Subtract line 2 from line 1d	3	1,675,368.	2,415,807.
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	1 1		
	see instructions).	4	25,131.	36,237.
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	1,650,237.	2,379,570.
6	Multiply line 5 by .035	6	57,758.	83,285.
7	Recoveries of prior-year distributions	7	0.	0.
8	Minimum Asset Amount (add line 7 to line 6)	8	57,758.	83,285.
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		61,864.
2	Enter 85% of line 1	2		52,584.
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		57,758.
4	Enter greater of line 2 or line 3	4		57,758.
5	Income tax imposed in prior year	5		0.
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	6		<u>57</u> ,758.
7	Check here if the current year is the organization's first as a non-functionally	/-integrate	ed Type III supporting organi	
	instructions).			

	rdule A (Form 990 or 990 EZ) 2014 PARTNERS IN T	ORAH,INC。 (a)(3) Supporting Orga	2 nizations (continued)	0-8908428 Page 7
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	7,000	727,757.
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations		·
4				
5	Qualified set-aside amounts (prior IRS approval required)			
6		· · · · · · · · · · · · · · · · · · ·		
7		727,757.		
8	Distributions to attentive supported organizations to which ti	12771311		
0	(provide details in Part VI). See instructions	727,757.		
	Distributable amount for 2014 from Section C, line 6	57,758.		
9		100%		
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(III)
Sect	Ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			57,758.
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:		·	
a				
b				
c			· · · · · · · · · · · · · · · · · · ·	
<u>d</u>				
e	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
ī	Carryover from 2009 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$ 727,757.			
—	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			57,758.
	Remainder, Subtract lines 4a and 4b from 4.	669,999.		
5	Remaining underdistributions for years prior to 2014, if			
•	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
Ū	and 4b from line 1 (if amount greater than zero, see			
	•			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j	669,999.		
	and 4c.	009,999.		
8	Breakdown of line 7:			
<u>a</u>				
<u>b</u>				
<u>¢</u>			·	
<u>d</u>	Excess from 2013			

669,999.

e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014 PARTNERS IN TORAH, INC. 20-8908428 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Also complete this part for any additional information. (See Instructions).
PART IV, SECTION D, QUESTION NUMBER 3.
MINO OR MILE MODICINES OF DADMINDER IN MODALI CARRY MODOCK AND MAN AND THE
TWO OF THE TRUSTEE OF PARTNERS IN TORAH, GARY TORGOW AND MAX BERLIN,
ALSO SERVE ON THE YESHIVATH BETH YEHUDAH'S FINANCE COMMITTEE.
PART V, SECTION D, LINE 8.
MO COURD COM OF EDUCAMONG GERVITORS AND WAR OF MAN DECIT THE
TO COVER COST OF EDUCATORS SERVICES AND USE OF THE FACILITY

SCHEDULE D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 20-8908428

	PARTNERS IN TORAH, INC.	20-8908428
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	rring
	impermissible private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV,	, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply),	
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically	y important land area
	Protection of natural habitat Preservation of a certified h	istoric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
	year >	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during to	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(t	
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's	ganization's accounting for
Dai	conservation easements. † III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Accote
1 41	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Online Assets.
4-	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	ad balance about warks of art
ıa	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	· ·
	the text of the footnote to its financial statements that describes these items.	public service, provide, in Part Alli,
h	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and be	palance shoot works of ort. historical
U	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	·
	•	race, provide the following amounts
	relating to these items: (i) Revenue included in Form 990, Part VIII, line 1	▶ ¢
		. > \$
2	(ii) Assets included in Form 990, Part X	
~	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	provide
а		▶ \$
	Assets included in Form 990, Part X	· ▶ \$
D	Assers meliuco in total soci tart A	Ψ

		RS IN TORAH				20-8	<u>908428</u>	Page 2
Pa	rt III Organizations Maintaining (
3	Using the organization's acquisition, access	ion, and other record	ds, check any	of the following that	are a sigr	nificant use of it	s collection i	tems
	(check all that apply):							
a	Public exhibition	C	d Loan	or exchange program	ns			
b	Scholarty research	€	e 🔲 Other					
С	Preservation for future generations							
4	Provide a description of the organization's of	ollections and explai	in how they fu	rther the organization	n's exemp	ot purpose in Pa	art XIII.	
5	During the year, did the organization solicit			-	-			
	to be sold to raise funds rather than to be m	naintained as part of	the organization	on's collection?	,, ,		Yes	☐ No
Pa	rt IV Escrow and Custodial Arrar	igements. Compl	ete if the organ	nization answered "Y	es" to Fo	rm 990, Part IV	, line 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custoo	lian or other intermed	diary for contri	butions or other ass	ets not in	cluded		
	on Form 990, Part X?					[Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII							
			-				Amount	
С	Beginning balance					1c		
d						1d		
е	Distributions during the year				• •••••	1e		
f	Ending balance							
2a	Did the organization include an amount on F						Yes	No
	If "Yes," explain the arrangement in Part XIII							
Pai								
		(a) Current year	(b) Prior ye			Three years back	(e) Four ve	ars back
1a	Beginning of year balance						1	
ь	Contributions					-		
C	Net investment earnings, gains, and losses							
d	Grants or scholarships						1	
9	Other expenditures for facilities						 	
·	and programs	j		•				
	Administrative expenses						 	
,			-				 	
9	Provide the estimated percentage of the cur		e (line 10, colu	imu (a)) bold as:				
2	Board designated or quasi-endowment		o (iiilo 19, coid	iriii (a)) ri o iu as.				
a			70					
ь	Permanent endowment							
С	Temporarily restricted endowment							
	The percentages in lines 2a, 2b, and 2c show	•						
За	Are there endowment funds not in the posse	ission of the organiza	ation that are r	neid and administere	d for the	organization	<u> </u>	
	by:							es No
							3a(i)	
	(ii) related organizations						3a(ii)	
þ	If "Yes" to 3a(ii), are the related organizations			?			3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere			1a. See Form 990, F	Part X, line	10.	····	
	Description of property	(a) Cost or of	, , ,	Cost or other		ımulated	(d) Book v	alue
		basis (investr	nent) t	pasis (other)	depre	cration		
	Land							
	Buildings							
C	Leasehold improvements			<u> </u>			· · · · · · · · · · · · · · · · · · ·	
d	Equipment							
е	Other							
Total	Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. column (B)	line 10c.)				0.

Schedule D (Form 990) 2014 PARTNERS IN	TORAH, IN	c	20	-8908428 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
(A) FIRST MANHATTAN - (B) MARKETABLE SECURITIES	2,131,2	74 END OF V	END MYDEEM	173 T 110
	2,131,2	14. EMD-OF-I	EAR MARKET	VALUE
(C) (D)			······································	
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,131,2	74.		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"				
(a) Description of investment	(b) Book value	(c) Method of v	aluation: Cost or end	l-of-year market value
				
(2)				
(3)				
(5)				·
			· 	
(7)				
(8) (9)			······································	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11d. See Form 990, I	Part X, line 15	
	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		***************************************		
	**			
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		<u></u>	
Complete if the organization answered "Yes" 1	to Form 990 Part IV	line 11e or 11f See Form	990 Part Y line 25	
(a) Description of liability	010111000,12111,	(b) Book value	330, Fart X, III 6 25.	
(a) Description of Hability (1) Federal income taxes		(2) = 0 (1) (2.11)		
(2)				
(3)				
(4)				
(5)		1		
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.) 🕨			
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footno	ote to the organization's fi	nancial statements	hat reports the
organization's liability for uncertain tax positions under	FIN 48 (ASC 740). C	heck here if the text of the	footnote has been	provided in Part XIII
			Sch	edule D (Form 990) 2014

	dule D (Form 990) 2014 PARTNERS IN TORAH, INC.		20-8908428 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per F	Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	********	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	_
b	Donated services and use of facilities	2b]
C	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d]
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b]
C	Add lines 4a and 4b		4c
5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	**** ** * -1111111	5
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per	Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	* *** **** *****	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a]
b	Prior year adjustments	2b	
C	Other losses	2c] {
d	Other (Describe in Part XIII)] [
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	45]
С	Add lines 4a and 4b] 4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Pa	t XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi		4, Fath, iiio 2, Fath,

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

	;
► Attach to Form 990.	The state of the s
	Total Carlotter
	Information .
	4

2014 Open to Public

Inspection

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

2 [] Schedule I (Form 990) (2014) Employer identification number 20-8908428 (h) Purpose of grant or assistance X Yes DULT EDUCATION Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance : : (f) Method of valuation (book, FMV, appraisal, other) ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 772,757 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 38-1437939 B01(C)(3) INC. Enter total number of other organizations listed in the line 1 table PARTMERS IN TORAH, Part I General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government YESHIVATH BETH YEHUDAH SOUTHFIELD, MI 48076 Name of the organization 15751 LINCOLN DR. Part II

Page 2 Schedule I (Form 990) (2014) (f) Description of non-cash assistance 20-8908428 (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients PARTNERS IN TORAH, INC. (a) Type of grant or assistance Schedule I (Form 990) (2014) 432102 10-15-14 Part III

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** PARTNERS IN TORAH, INC. 20-8908428 FORM_990, PART VI, SECTION A, LINE 2: ARTHUR A. WEISS, SECRETARY AND TRUSTEE GARY TORGOW, TREASURER AND TRUSTEE LARRY WOLFE, TRUSTEE MAX BERLIN, TRUSTEE ARTHUR A. WEISS AND OTHER ATTORNEYS FROM JAFFE, RAITT, HEUER & WEISS, P.C., ARE THE ATTORNEYS FOR GARY TORGOW, LARRY WOLFE AND MAX BERLIN. FORM 990, PART VI, SECTION B, LINE 11: COPY OF THE FORM 990 IS DISTRIBUTED TO THE GOVERNING BODY FOR REVIEW AND COMMENT PRIOR TO ITS BEING FILED. FORM 990, PART VI, SECTION B, LINE 12C: EACH OFFICER, DIRECTOR OR TRUSTEE IS REQUIRED TO FILE AN ANNUAL STATEMENT REGARDING CONFLICT OF INTERESTS WHICH IS REVIEWED BY THE BOARD. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON A WRITTEN REQUEST.

SCHEDULE R (Form 990)

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.

Open to Public Inspection 2014

OMB No 1545-0047

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

INC.

PARTNERS IN TORAH,

Name of the organization Department of the Treasury Internal Revenue Service

Employer identification number 20-8908428

Part	identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.	if the organization answered "Yes" of	on Form 990, Part IV, line 33					
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) r Total income	(e) End-of-year assets		(f) Direct controlling entity	
Part II	Identification of Related Tax-Exempt Organizations Con organizations during the tax year.	frons Complete if the organization ar	nplete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt	Part IV, line 34 be	cause it had one o	г more related tax-ехел	ıpt	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 12(b)(13) controlled entity?	2(b)(13)
YESHIVATH 1 15751 LINCC SOUTHFIELD	YESHIVATH BETH YEHUDAH - 38-1437939 15751 LINCOLN DR, SOUTHFIELD, MI 48076	EDUCATION	MICHIGAN	501(C)(3)	509(A)(1)	N/A	 	×
For Pape	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	is for Form 990.				Schedule R (Form 990) 2014	Form 990)	2014

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Schedule R (Form 990) 2014 PARTINERS IN TORAH, INC.

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Part III

(i) (k) General or Percentage managing ownership parine? (i) Yes/No		
General or P maraging partner?		
Code V-UBI as amount in box ma 20 of Schedule EX K-1 (Form 1055) Ng		
(h) Disproportionate attocations? Yes No		
(g) Share of end-of-year assets		
(f) Share of total income		
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		
(d) Direct controlling entity		
(c) Legal domkile (state or foreign country)		
(b) Primary activity		
(a) Name, address, and EIN of related organization		

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

_	fon (£7%)	olled ty?	Š				i						
=	Section 512(b)(13)	g g	Yes										
Ξ	Percentage	ownership							_		·		
	Share of												
Ð	Share of total	псот							:				
(e)	Type of entrty	(C corp, S corp, or trust)	,					•					
(g)	Legal domeda Direct controlling Type of entrty	entity										,	
(c)	Legal domicile	(state or foreign	country)										
 (Q)	Primary activity												
(a)	Name, address, and EIN	OI telated oiganization											

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				F	No.
1 During the tax year, did the organization engage in any of the following transaction	ns with one or more re	following transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?		-
	, k			æ	X
:	:			4	×
:				10	×
d Loans or loan guarantees to or for related organization(s)	: : : : : : : : : : : : : : : : : : : :			PĻ	×
e Loans or loan guarantees by related organization(s)			::	16	×
P. C. Sanda Comment of the Comment o					
				#	×
				19	×
h Purchase of assets from related organization(s)				ŧ	X
;				ţ	×
j Lease of facilities, equipment, or other assets to related organization(s)		:		1j	X
k Lease of facilities, equipment, or other assets from related organization(s)				ş	>
-	ed organization(s)			£ ;	4 >
m Performance of services or membership or fundralsing solicitations by related organization(s)	anization(s)	***************************************		= .	∢ ;
in the control of the	arıızatıon(s)			Ē	×
	:			Ę	×
o Sharing of paid employees with related organization(s)	:			9	×
p Reimbursement paid to related organization(s) for expenses				÷	-
		*******)		1	1
d neimburgement paid by related bigaintainorits) for expenses				루	×
r Other transfer of cash or property to related organization(s)				+	×
		**** *** * * * * * * * * * * * * * * * *		18	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete th	Is line, including covered	relationships and transaction thresholds.		
(a)	(q)	(0)	5)		
Name of related organization	Transaction type (a·s)	Amount involved	Method of determining amount involved	olved	
(1)					
(2)					
(3)					
(4)					
(9)					
(6)					
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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.

(a) (b) (c) (d)	(e)	(0)	(a) (b)	9	(b)	ε	€	8	8
Name, address, and EiN	Primary activity	Legal domicile	Predominant income parints sec.	0,	Share of	Dispreper- forate	Code V-UBI	General o	Percentage
of entity		(state or foreign country)	excluded from tax under orgs?	total income	end-of-year assets	albrations?	alocatous of Schedule K-1 partners ownership yes No (Form 1065) yes No	partner?	ownership
								-	
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Schedule R	(Form 990) 2014	PARTNERS	IN TORAH,	INC.	20-8908428 Page 5
Part VII	(Form 990) 2014 Supplemental Infor	rmation			20 03 00 220 1 490 0
L	Provide additional inform	ation for monanco	to questions on Co	chedule R (see instructions).	
	Provide additional inform	ation to responses	to questions on Sc	medule H (see instructions).	······································
					
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