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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)

Open to Public Inspection

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.

OMB No 1545-0047

| <u> A I</u> | or the | 2014 calendar year, or tax year beginning and e | ending | _ | |
|-----------------------------|----------------------|---|----------------|------------------------------|-----------------------------|
| В | Check If | C Name of organization | | D Employer identific | ation number |
| ē | pplicable | AMERICAN FRIENDS OF AMALEH SHEL | | İ | |
| | Addres change | TORAH, INC. | | | |
| | Name change | Doing business as | | 22-3 | 758699 |
| | Initial return | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | E Telephone number | |
| | Final return/ | 425 12TH STREET | | | |
| | termin- ated | City or town, state or province, country, and ZIP or foreign postal code | | G Gross receipts \$ | 389507. |
| | Amend | | | H(a) is this a group re | |
| | _ireturn Applica | | | for subordinates | |
| <u> </u> | _Ition pendin | | | H(b) Are all subordinates in | |
| | | mpt status X 501(c)(3) | F 527 | 1 '' | |
| | | | or <u>5</u> 27 | 1 | list (see instructions) |
| | | e: N/A organization: X Corporation Trust Association Other | I Veer | H(c) Group exemption | |
| | | <u> </u> | L Year | of formation: ZUUU M | State of legal domicile: NJ |
| P | | Summary | | | |
| e | 1 | Briefly describe the organization's mission or most significant activities THE (| | | |
| Governance | 1 - | SUPPORT TO JEWISH THEOLOGICAL AND EDUCATI | | • | |
| e. | 2 (| Check this box 🕨 🔲 if the organization discontinued its operations or dispos | ed of more | e than 25% of its net as: | sets. |
| Š | 1 8 | lumber of voting members of the governing body (Part VI, line 1a) | | 3 | <u> </u> |
| <u>ග</u> | 4 1 | Number of independent voting members of the governing body (Part VI, line 1b) | | 4 | 0 |
| Activities & | 5 | otal number of individuals employed in calendar year 2014 (Part V, line 2a) | | 5 | 0 |
| ŧ | 6 | otal number of volunteers (estimate if necessary) | . | 6 | 0 |
| ŧ | 7a | otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (c), the CEIVED | 3() | 7a | 0. |
| ⋖ | 1 61 | Net unrelated business taxable income from Form 990. I, line 34 | S | 7b | 0. |
| | | ₩ NOV 1 2 2015 | 9 | Prior Year | Current Year |
| 4. | 8 (| Contributions and grants (Part VIII, line 1h) | (O) | 266900. | 389378. |
| ž | ا ما | Program service revenue (Part VIII line 2g) | ĴŒĬ├ | 0. | 0. |
| Revenue | 10 | nvestment income (Part VIII, column (A), lines 3, 4, and 7d) OGDEN, UT | • | 147. | 129. |
| æ | 11 (| Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0. | 0. |
| | | otter revenue (Fart viii, columni (A), lines 3, 60, 60, 90, 100, and 110) | | 267047. | 389507. |
| | | | | 297485. | 340350. |
| | | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 297483. | |
| | | Benefits paid to or for members (Part IX, column (A), line 4) | | | 0. |
| Expenses | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 0. | 0. |
| eï | _ | Professional fundraising fees (Part IX, column (A), line 11e) | , | 0. | 0. |
| 꼾 | l | otal fundraising expenses (Part IX, column (D), line 25) | 30. | 22552 | F 1001 |
| ш | 1 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 33770. | 54301. |
| , | 18 | otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25) | | 331255. | <u>394651.</u> |
| [<u>_</u> | 19 | Revenue less expenses Subtract line 18 from line 12 | | <64208. | <5144.> |
| Net Assets or Fund Balances | | | Be | ginning of Current Year | End of Year |
| set | 20 - | Total assets (Part X, line 16) | | 11772. | 6628. |
| t As | 21 - | Total liabilities (Part X, line 26) | | 50000. | 50000. |
| <u>₽</u> Ē | 22 | Net assets or fund balances Subtract line 21 from line 20 | | <38228. | <43372.> |
| P | art II | Signature Block | | | |
| Und | er penal | ties of perjury, I declare that I have examined this return, including accompanying schedules | and statem | ents, and to the best of my | knowledge and belief, it is |
| true | , correct | , and complete. Declaration of preparer (other than officer) is based on all information of wh | ich preparer | r has any knowledge. | |
| | | X Ja Kont | | 160 9 | 2015 |
| Sig | ո | Signature of officer | | Date | |
| Hei | - 1 | 1 lea Branch . Resident | | | |
| | _ | Type or print name and title | | | |
| | | Print/Type preparer's name Preparer's signature | - 1 | Date Check | PTIN |
| Pai | | ZEV KAUFMAN | 1 | LO/29/15 of employe | |
| | | Firm's name KAUFMAN & KAUFMAN, CPA S | | Firm's EIN | 80-0504371 |
| | | Firm's address 521 FIFTH AVE | | LIIII 2 LIM | 00 000401T |
| USE | Only | NEW YORK, NY 10175 | | Dhone no 21 | 22924401 |
| | | | | TEHORE NO. Z. I. | |
| | | S discuss this return with the preparer shown above? (see instructions) | | | |
| 4320 | 01 11-07 | LHA For Paperwork Reduction Act Notice, see the separate instruction | ns. | | Form 990 (2014) |

AMERICAN FRIENDS OF AMALEH SHEL

| orm | 990 (2014) TORAH, INC. | 22-3758699 Page 2 |
|--------|--|---------------------------------------|
| 2ar | t III Statement of Program Service Accomplishments | |
| | Check if Schedule O contains a response or note to any line in this Part III | |
| | Briefly describe the organization's mission: None | |
| | | |
| | | |
| | Did the organization undertake any significant 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 Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Yes X No |
| | If "Yes," describe these changes on Schedule O. | L1es ZZ_N |
| | Describe the organization's program service accomplishments for each of its three largest program services, as | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth | ers, the total expenses, and |
| a | revenue, if any, for each program service reported (Code) (Expenses \$359971. including grants of \$340350.) (Rever | nue \$ 389378. |
| _ | SUPPORT OF YESHIVOT, JEWISH THEOLOGICAL AND EDUCATIONAL | |
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| d | Other program services (Describe in Schedule O) | · · · · · · · · · · · · · · · · · · · |
| | (Expenses Including grants of \$) (Revenue \$ | |
| le_ | Total program service expenses ► 359971. | Form 990 (201 |

| | | | | .125 01 | | | | | |
|-------------|-------------|---------------|---------|---------|---|------|------------|-----|-------|
| Form 990 (2 | 2014) | TORAH, | INC. | | | | 22-3758699 |) P | age 🕄 |
| Part IV | Checklist o | f Required Sc | hedules | | | | | | |
| | | | | | _ | | | Yes | No |

| | | | Yes | No |
|-----|--|------|-------------|--------|
| 1 | is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A . | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3_ | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | |
| | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| | Schedule D, Part III | 8 | ļ. <u>.</u> | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for | | | |
| | amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | |
| | as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | | X_ |
| 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 | | X |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | Х |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII . | 12a | | X |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | _X_ |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | X | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | Х | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | _ |
| | complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | 000 | L |
| | | Form | 990 | (2014) |

| 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 17 if "Fes," complete Schedule I, Parts I and III 2 | | | | Yes | No |
|--|-----|---|---------|----------------|---------------|
| domestic government on Part IX, column (A), Ine 1? II "Yes," complete Schedule I, Part I and II 21 Did the organization report more than \$5,000 of grants or other assistance to not domestic individuals on Part IX, column (A), Ine 2? II "Yes," complete Schedule I, Part I and III 22 Did the organization answer "Yes" to Part VII, Section A, Ine 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 I. Part II and III 23 Did the organization have a tax-exempt bond issue with an outstanding pencipal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I. "Two", go to the 25a 24b Did the organization man are scrow account other than a refunding secrow at any time during the year to defease any time-exempt bonds? 25c Did the organization man are scrow account other than a refunding secrow at any time during the year? 26d Did the organization are an 'in behalf of' issuer for bonds outstanding at any time during the year? 26d Did the organization are an 'in behalf of' issuer for bonds outstanding at any time during the year? 27d Did the organization are an 'in behalf of' issuer for bonds outstanding at any time during the year? 28d Section 50 (Ic)(3), 50 (Ic)(4), and 50 (Ic)(23) organizations. Did the organization engage in an excess benefit transaction with a degularided person of which a degularided person on the access to the complete Schedule I. Part II 27d Did the organization are provided a grant or other assistance to an officer, director, trustee, or displayed and provides a grant or other assistance to an officer, director, trustee, eye 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 II, Part II in structures for applicable ling t | 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | <u></u> | 162 | INO |
| 22 Let the organization report more than \$5,000 of grains or other assistance to or for domestic individuals on Part IX, Column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VI, Section A, line 5, 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 Schedule II was assued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", por to line 25b Did the organization have a tax-exempt bond is sue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", por to line 25b Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization and was adequalized person during the year? If "Yes," complete Schedule L, Part II Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 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, or shapetal forms of these paraization 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 a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A A Family member or a current or forme | 21 | | 21 | | x |
| Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III Did the organization in west are "Yes" to Part IVI, 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 I, Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II "No", go to him a 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization invest any forceded of "issuer for bonds outstanding at any time during the year? 24d | 22 | | | | |
| 23 Did the organization answer "Yes" to Part VII, Section A, Inio 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 U. 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more in \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization maintain an escrew account other than a refunding secrow at any time during the year to defease any tax-exempt bonds and save than a refunding secrow at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II b is 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, in the schedule L, Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee themseld, 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 IV Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV That the part of comment of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member | 22 | | 22 | | x |
| and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Did the organization have a tax exempt bond issue with an outstanding pmorpal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I. If No.", go to him 25a 5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Did the organization invest as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 6 Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 6 Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 7 Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 8 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 in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction rate in engaged in an excess benefit transaction with a disqualified persons? If "Yes," complete Schedule L, Part II 7 Did the organization report any armount on Part X, line 5, 6, or 22 for recevables from or payables to any current or former officer, trustee, expending the persons? If "Yes," complete Schedule L, Part IV 8 A Note All Press of the organization receive any to a subs | 00 | | | | - |
| Schedule J 24 D dt 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 ines 24b through 24d and complete Schedule K. If "No"; go to line 25b but the organization maintain an escrow account other than a refunding escrow at any time during the year of the organization maintain an escrow account other than a refunding escrow at any time during the year of the any tax exempt bonds? 25 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? 25 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? 25 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 on a prior year, and that the transaction has not been reported on any of the organization report 90 or 990(E2? If "Yes," complete Schedule L, Part II 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 officer and any of the organization reports 90 or 990(E2? If "Yes," complete Schedule L, Part III 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable from prior or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV Annethy of which a current for former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV Annethy of which a current for former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than 250 (both of the schedule L, Part IV Did the organization receive more than 250 (both of the schedule L, Part IV Did th | 23 | | | | |
| 24a Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No"; go to line 25a b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d | | | 22 | | x |
| last day of the year, that was issued after December 31, 2002? If "yes," enswer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-eventpt bonds? did the organization maintain an escrow account other than a refunding escrow at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25d 24d 25d x x b is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d x x b is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d b is the organization one to the it issuer for bonds outstanding at any time during the year? 25d b is the organization one to the it issuer for bonds outstanding at any time during the year? 25d contribution or end to contribute on any of the organization one and itsue the organization one in the organization one in the organization o | | · | 25_ | | |
| Schedule K. If *No*, go to line 25a b | 24a | | | | |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an excrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 25a Section 501(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization gaps in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b Exception 501(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization gaps in an excess benefit transaction as one to been reported on any of the organization prompter of any of these series on the entire prompter of any of these series on the entire prompter of any of these persons? If "Yes," complete Schedule L, Part II 27b 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 28b Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c A nentity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a | | | 04- | | v |
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| c 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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3" If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 54 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O or Part | а | | 28a | | |
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| Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 X 34 X 35 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O | С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
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| contributions? If "Yes," complete Schedule M 30 | 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 1 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
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| Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 | 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
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| Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 | | | 35b | | |
| If "Yes," complete Schedule R, Part V, line 2 36 | 36 | | | | |
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| and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X | 37 | | | | |
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| Note. All Form 990 filers are required to complete Schedule O | 38 | | 1 | | |
| | | | 38 | X | |
| | | | Form | 990 | (2014) |

| Form | 990 (2014) TORAH, INC. 22-3758 | <u>699</u> | P | age 5 |
|------------|--|--|---------------|----------|
| Par | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 | | | l |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c_ | _ | |
| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | |
| | filed for the calendar year ending with or within the year covered by this return 2a | | | |
| 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 | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a_ | - | X |
| 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 any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X |
| b | If "Yes," enter the name of the foreign country. ▶ | | | ĺ |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | _5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Х |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | _5c_ | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | |
| | any contributions that were not tax deductible as charitable contributions? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | ا |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | _ | | v |
| _ | to file Form 8282? | 7c | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | _ | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e 7f | | |
| Ť | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| 9 | If the organization received a contribution of dualified intellectual property, did the organization file a Form 1098-C? | 7h | | |
| | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | - | | |
| 8 | sponsoring organizations maintaining donor advised funds, old 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 | | ĺ |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | 1 |
| 11 | Section 501(c)(12) organizations. Enter. | | | |
| | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | |
| _ | amounts due or received from them) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | |
| | organization is licensed to issue qualified health plans | Į | | |
| С | Enter the amount of reserves on hand | L | | <u> </u> |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 1 <u>4</u> b | L | <u>L</u> |
| | | Form | 990 | (2014) |

AMERICAN FRIENDS OF AMALEH SHEL 22-3758699 TORAH. Form 990 (2014) INC Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 0 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

432006 11-07-14

State the name, address, and telephone number of the person who possesses the organization's books and records:

ORGANIZATION'S ADDRESS

ORGANIZATION

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

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

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

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

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

| (A) | (B) | | | Post | i) | , | | (D) | (E) | (F) |
|----------------------|-------------------|--------------------------------|---------------------------------------|----------------|--------|--|--------------|----------------------|---------------------------|-----------------|
| Name and Title | Average | | Position o not check more than one | | | | | Reportable | Reportable | Estimated |
| | hours per | box, | unle eran | ss pe d a d | rson i | is bot or/trus | h an tee) | compensation from | compensation from related | amount of other |
| | week (list any | - | | | | | | the | organizations | compensation |
| | hours for | direc | | | | - | | organization | (W-2/1099-MISC) | from the |
| | related | ee or | Ste | | | nsate | | (W-2/1099-MISC) | (,, | organization |
| | organizations | trust | 를 | | yee | ошо | | , | | and related |
| | below | Individual trustee or director | Institutional trustee | Ę. | empl | loyee | Jec | | | organizations |
| | line) | ğ | Insti | Officer | Key | Highest compensated employee | Form | | | |
| (1) LEA ROSENBAUM | 0.00 | | | | | | | | _ | |
| PRESIDENT | | | | | | _ | | 0. | 0. | 0 |
| (2) ELKA FEINSTEIN | 0.00 | | | | | | | | | |
| V.P. | | | | | | | | 0. | 0. | 0 |
| (3) GITTY BODENSTEIN | 0.00 | | | | | | | | | |
| TREASURER | | | | | | | | 0. | 0. | 0 |
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Form 990 (2014)

| | t VII Section A. Officers, Directors, Trus | tees, Key Em | ploy | ees, | ane | d Hi | ghe | st C | Compensated Employe | es (continued) | | | |
|----------|--|--|--------------------------------|-----------------------------|---------|-----------------------|------------------------------|-------------|--|--|------------|--|---------------------|
| | (A) Name and title | (B) Average hours per week | ьох | not ci , unle: cer an | ss pe | ntion more rson | than is bot | h an | (D) Reportable compensation from | (E) Reportable compensation from related | | (F) Estima amoun othe | t of |
| | | (list any hours for related organizations below line) | Individual trustee or director | institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC | | from the organization organization organization organization compensation organization organizat | ne ition ited |
| _ | | | | | | | | | | | | _ | |
| <u>.</u> | | | | | | | | | | | | | |
| | | | | | | | | | | | + | | |
| | | | | | | | | | | | | | |
| | | | | | | | _ | | | | | | |
| | | | | | | | | | | | | | |
| | | · | | | | | | | | | | | |
| | Sub-total . | | | | | | | | 0. | |) . | | 0. |
| С | Total from continuation sheets to Part V Total (add lines 1b and 1c) | II, Section A | | | | · | | > | 0. | (|) .) . | | 0. |
| 2 | Total number of individuals (including but r compensation from the organization | not limited to th | ose | liste | d at | oove | e) wł | no r | eceived more than \$100 | 0,000 of reportable | | l _v | |
| 3 | Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s | | ıste | e, ke | у еп | nplo | yee, | or | highest compensated e | mployee on | | Yes | No |
| 4 | For any individual listed on line 1a, is the si and related organizations greater than \$15 | um of reportab | | | | | | | | the organization | | 4 | x |
| 5 | Did any person listed on line 1a receive or rendered to the organization? If "Yes," con | • | | | | - | | elat | ted organization or indiv | idual for services | | 5 | x |
| Sec 1 | complete this table for your five highest countries the organization. Report compensation for | | | | | | | | | | ensa | tion from | |
| | . (A) Name and business | | | ONE | | ***** | <u> </u> | | (B) Description of s | | Со | (C) mpensati | on |
| | | | | · | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | <u>-</u> | |
| 2 | Total number of independent contractors (\$100,000 of compensation from the organ | | ot I | mite | d to | | se lis | stec | d above) who received n | nore than | | | |
| | | | | | | | <u> </u> | | | | F | orm 990 | (2014) |

| rait | | Check if Schedule O cont | | ponse | or note to any line | e in this Part VIII | | | |
|--|----------|---|--------------|-----------|--|----------------------|--|---|--|
| | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| t str | l a | Federated campaigns | | 1a | | | | - | |
| irar oun | | Membership dues | | 1b | | | | | |
| Đặ. | С | Fundraising events | Γ | 1c | | | | | |
| ar / | | Related organizations | | 1d | | | | | |
| S E | | Government grants (contribut | tions) | 1e | | | | | |
| <u>S</u> S | | All other contributions, gifts, gran | · · - | | | | | | |
| the l | • | similar amounts not included abo | | 1f | 389378. | | | | |
| ΞĎ | g | Noncash contributions included in lines | _ | ····· | | | į | | |
| Contributions, Gifts, Grants and Other Similar Amounts | - | Total. Add lines 1a-1f | | | | 389378. | | | |
| | | | | | Business Code | | | | |
| ဗ္ပ 2 | 2 a | | | | | | | | |
| اه څ | b | | | | | | | | |
| Sal | С | | | | | | | | |
| e a | d | | | | | | | | |
| Program Service Revenue | е | | | | | | | | |
| ፈ | f | All other program service reve | enue . | | | | | | |
| | g | Total. Add lines 2a-2f | | | > | | | | |
| 3 | 3 | Investment income (including | dividends | s, intere | est, and | İ | | | |
| | | other sımılar amounts) | | | ▶ | 129. | | | 129. |
| 4 | 1 | Income from investment of ta | x-exempt | bond p | oroceeds 🕨 | | | | |
| 5 | 5 | Royalties | | | • | | | | |
|] | | | (i) Re | eal | (II) Personal | | | | |
| Ε | ба | Gross rents | | | | | | | |
| | b | Less [,] rental expenses | | | | | | | |
| | С | Rental income or (loss) | | | | | ! | | |
| | d | Net rental income or (loss) | | | <u> </u> | | | | |
| 7 | 7 a | Gross amount from sales of | (ı) Secu | ırıtıes | (II) Other | | | | |
| | | assets other than inventory | | | | | | | |
| | b | Less cost or other basis | | | | | ľ | | |
| | | and sales expenses | | | | | | | |
| 1 | С | Gain or (loss) | | | <u> </u> | | | | |
| | d | Net gain or (loss) | | • | > | | <u> </u> | | |
| | 3 a | Gross income from fundraising | ig events (| not | | | | | |
| eu | | including \$ | of | | | | | | |
| ا <u>چ</u> | | contributions reported on line | 1c) See | | | - | | | |
| Other Revenu | | Part IV, line 18 | | . а | | | | | |
| 동 | | Less direct expenses | | . b | | | | | |
| | | Net income or (loss) from fund | _ | | | | | | |
| 9 | Э а | Gross income from gaming a | ctivities. S | ee | | | | | |
| | | Part IV, line 19 | | а | | | | | |
| | | Less direct expenses | | b | | | | | |
| | | Net income or (loss) from gan | | ties | | <u> </u> | | | |
| 10 |) a | Gross sales of inventory, less | returns | | | | | | |
| | | and allowances | | . a | | | | | |
| | | Less cost of goods sold | | . b | | | | | |
| | <u>c</u> | Net income or (loss) from sale | | tory | P- | | | | |
| | | Miscellaneous Revenu | | | Business Code | | | | |
| 11 | 1 a | | | | | <u> </u> | | | |
| | b | | | | | | | | |
| | c | All all and an area | - | | | | | | |
| | d | All other revenue | • | | | | | | |
| | | Total. Add lines 11a-11d | | | | 389507. | 0. | 0. | 129. |
| 432009 11-07-14 | <u> </u> | Total revenue. See instructions. | | · | | | | | Form 990 (2014) |

TORAH, INC.

| Part | IX | Statement of | t Functiona | I Expenses | | |
|------|----|--------------|-------------|------------|------|--|
| | | | | | | |

| | on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response | | this Part IX | | |
|----|--|-----------------------|------------------------------|---|--------------------------------|
| | ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 800. | 800. | | · |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals See Part IV, line 22 | | | | |
| | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | 220550 | 222552 | | |
| | individuals See Part IV, lines 15 and 16 | 339550. | 339550. | | |
| | Benefits paid to or for members | | | | |
| | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| | Other salaries and wages | | | | |
| | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | · · | - | | |
| | Other employee benefits | | | | |
| | Payroll taxes | | | | |
| | Fees for services (non-employees) | | | | |
| | Management . | | | | |
| | Legal Accounting | 1300. | 1300. | | |
| | Lobbying | 1500. | 1500. | | |
| | Professional fundraising services. See Part IV, line 17 | | | ···- | |
| | Investment management fees | | | | |
| | Other (If line 11g amount exceeds 10% of line 25, | | | | |
| 9 | column (A) amount, list line 11g expenses on Sch O.) | | | | |
| 12 | Advertising and promotion | 1530. | 1530. | | |
| 13 | Office expenses | 67. | 67. | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | - |
| 17 | Travel . | 7886. | 7886. | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | 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 O.) | | | | |
| а | DINNER EXPENSES | 34680. | | | 34680 |
| | GIFTS | 6857. | 6857. | | |
| | BANK CHARGES | 1956. | 1956. | | |
| d | LICENSES & FEES | 25. | 25. | | · |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 394651. | 359971. | 0. | 34680 |
| 26 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here If following SOP 98-2 (ASC 958-720) | | | <u> </u> | Form 990 (2014 |

Form 990 (2014)
Part X | Balance Sheet TORAH, INC.

| art X | Balance Sheet | | |
|-------|--|---------------------------------------|------------------------------|
| | Check if Schedule O contains a response or note to any line in this Part X | | |
| | | (A) Beginning of year | (B) End of year |
| 1 | Cash · non-interest-bearing | 11772. | 1 6628 |
| 2 | Savings and temporary cash investments | | 2 |
| 3 | Pledges and grants receivable, net | | 3 |
| 4 | Accounts receivable, net | | 1 |
| 5 | Loans and other receivables from current and former officers, directors, | | |
| • | trustees, key employees, and highest compensated employees. Complete | | |
| | Part II of Schedule L | 1 1 | 5 |
| 6 | Loans and other receivables from other disqualified persons (as defined un | | |
| " | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu | 1 | |
| | employers and sponsoring organizations of section 501(c)(9) voluntary | | |
| | employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 5 |
| 7 | Notes and loans receivable, net | | 7 |
| 7 | Inventories for sale or use | | 3 |
| 8 | Prepaid expenses and deferred charges | · · · · · · · · · · · · · · · · · · · | 9 |
| 9 | Land, buildings, and equipment cost or other | | 7 . |
| lua | basis Complete Part VI of Schedule D | | |
| . | | | _ |
| | Less, accumulated depreciation 10b | | Oc |
| 11 | Investments - publicly traded securities | | 1 |
| 12 | Investments - other securities. See Part IV, line 11 | | 2 |
| 13 | Investments - program-related. See Part IV, line 11 | | 3 |
| 14 | Intangible assets | | 4 |
| 15 | Other assets. See Part IV, line 11 | | 5 6 6628 |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | |
| 17 | Accounts payable and accrued expenses | 1 | 7 |
| 18 | Grants payable | | 8 |
| 19 | Deferred revenue | | 9 |
| 20 | Tax-exempt bond liabilities | | |
| 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | <u>!1 </u> |
| 22 | Loans and other payables to current and former officers, directors, trustees | l l | |
| | key employees, highest compensated employees, and disqualified persons | i i | _ |
| | Complete Part II of Schedule L | | 5000 |
| 23 | Secured mortgages and notes payable to unrelated third parties | | 3 50000 |
| 24 | Unsecured notes and loans payable to unrelated third parties | | 24 |
| 25 | Other liabilities (including federal income tax, payables to related third | _ | |
| | parties, and other liabilities not included on lines 17-24) Complete Part X of | 1 | _ |
| 1 | Schedule D | | 5 5000 |
| 26 | Total liabilities, Add lines 17 through 25 | | 50000 |
| } | , , , | nd | |
| | complete lines 27 through 29, and lines 33 and 34. | | _ |
| 27 | Unrestricted net assets | | |
| 28 | Temporarily restricted net assets | | 28 |
| 29 | Permanently restricted net assets | | !9 |
| | Organizations that do not follow SFAS 117 (ASC 958), check here | <u>~</u> | |
| | and complete lines 30 through 34. | | , |
| 30 | Capital stock or trust principal, or current funds | | 90 (|
| 31 | Paid in or capital surplus, or land, building, or equipment fund | | 31 (|
| 32 | Retained earnings, endowment, accumulated income, or other funds | <38228.>3 | |
| 33 | Total net assets or fund balances | <38228.>3 | |
| 34 | Total liabilities and net assets/fund balances | 11772. | 6628 Form 990 (201 |

AMERICAN FRIENDS OF AMALEH SHEL

| | | <u>-3758699</u> |) Pag | e 12 |
|----|--|-----------------|-----------------|--------------|
| Pa | t 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) | | 38950 | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | ļ . | 39465 | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | | <514 | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | | <3822 | <u> </u> |
| 5 | Net unrealized gains (losses) on investments | | | |
| 6 | Donated services and use of facilities 6 | ļ | | |
| 7 | Investment expenses | | | |
| 8 | Prior period adjustments . 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | | | <u>0.</u> |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, | | | |
| | <u>column (B)) </u> | <u> </u> | <4337 | <u>72.</u> > |
| Pa | rt XIII Financial Statements and Reporting | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | |
| | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990. X Cash Accrual Other | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | <u>X</u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a | | | |
| | separate basis, consolidated basis, or both | | 1 1 | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate bas | ıs, | | |
| | consolidated basis, or both | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud | ıt, | | |
| | 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 Schedule | 0. | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single A | | | |
| | Act and OMB Circular A-133? | За | 1 1 | Х |
| ь | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required a | | 1 | |
| ~ | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | | |
| | and the state of t | | n 990 (2 | 2014) |
| | | | · · \- | / |

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ 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

Name of the organization

AMERICAN FRIENDS OF AMALEH SHEL TORAH,

INC

Employer identification number 22-3758699

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) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) Я 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) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. J Type 1. 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. 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 Provide the following information about the supported organization(s) (iv) is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (iii) Type of organization listed in your (described on lines 1-9 support (see other support (see organization governing document? above or IRC section Instructions) Instructions) Yes (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

| Pa | art II Support Schedule for | _ | | | | | |
|----|--|----------------------|----------------------|------------------------|----------------------|-----------------------|---------------|
| | (Complete only if you checked fails to qualify under the tests | | | _ | on failed to qualify | under Part III If the | organization |
| Sa | ction A. Public Support | , listed below, piez | ase complete Fait | <i>j</i> | | | |
| | | (=) 2010 | (b) 2011 | (=) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | endar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (a) 2013 | (e) 2014 | (I) IOIai |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| _ | include any "unusual grants ") | | - | <u> </u> | | | |
| 2 | Tax revenues levied for the organ- | | | | ļ | | |
| | ization's benefit and either paid to | | | | | | |
| _ | or expended on its behalf | | | | | | - |
| 3 | | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | <u> </u> | | | | |
| 4 | Total. Add lines 1 through 3 | | | - | | | |
| 5 | The portion of total contributions | | ! | | | | |
| | by each person (other than a | | 1 | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | · |
| | Public support. Subtract line 5 from line 4 | | <u> </u> | | <u> </u> | <u>.L</u> | Ĺ |
| | ction B. Total Support | | T | | T | T | |
| | endar year (or fiscal year beginning in) 🕨 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 7 | Amounts from line 4 | | | - | | | <u> </u> |
| 8 | Gross income from interest, | | | | | ! | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | - | | |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | L | <u> </u> | <u> </u> | <u> </u> |
| 12 | Gross receipts from related activities | | | • | | 12 | |
| 13 | First five years. If the Form 990 is fo | r the organization' | s first, second, the | rd, fourth, or fifth t | ax year as a secti | on 501(c)(3) | . — |
| _ | organization, check this box and sto | here | · | | | • | |
| | ction C. Computation of Publ | | | | | | |
| 14 | Public support percentage for 2014 (| | | column (f)) | | 14 | % |
| 15 | | | | | | 15 | % |
| 16 | a 33 1/3% support test - 2014. If the | | | | 14 is 33 1/3% or | more, check this bo | ox and |
| | stop here. The organization qualifies | | | | | | ▶∟ |
| ı | b 33 1/3% support test - 2013. If the | | | | d line 15 is 33 1/3° | % or more, check t | nis box |
| | and stop here. The organization qua | | | | | | . ▶∟_ |
| 17 | a 10% -facts-and-circumstances tes | | | | | | |
| | and if the organization meets the "fac | | | | | art VI how the orgai | nization |
| | meets the "facts-and-circumstances" | | | | | | ▶□ |
| 1 | b 10% -facts-and-circumstances tes | t - 2013. If the org | ganization did not | check a box on lin | e 13, 16a, 16b, or | 17a, and line 15 is | 10% or |

Schedule A (Form 990 or 990-EZ) 2014

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

| <u>~</u> | qualify under the tests listed b | elow, please comp | lete Part II) | | | | |
|----------|--|---------------------------------------|---------------------|----------------------|---------------------|---------------------|---------------------------------------|
| | tion A. Public Support | · · · · · · · · · · · · · · · · · · · | | | | | · · · · · · · · · · · · · · · · · · · |
| | ndar year (or fiscal year beginning in) 🕨 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | ļ | | | |
| | membership fees received. (Do not | 455500 | 100050 | 101160 | 066000 | 200250 | 1145510 |
| | include any "unusual grants ") | 176722. | 133350. | 181169. | 266900. | 389378. | 1147519. |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | - | | |
| ** | ization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to | | | | : | | |
| _ | the organization without charge | 176700 | 133350. | 181169. | 266000 | 200270 | 1147510 |
| | Total. Add lines 1 through 5 | 176722. | 133350. | 191109. | 266900. | 389378. | 1147519. |
| | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | · | | | 0. |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | 0. |
| c | Add lines 7a and 7b | | ·- | | | | 0. |
| _ | Public support (Subtract line 7c from line 6) | | | | | | 1147519. |
| | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 9 | Amounts from line 6 | 176722. | 133350. | 181169. | 266900. | 389378. | 1147519. |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income | | ļ | | | | |
| | (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | <u> </u> | |
| | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital | | | | | | |
| 10 | assets (Explain in Part VI.) | 176722. | 133350. | 181169. | 266900. | 389378. | 1147519. |
| | Total support. (Add lines 9, 10c, 11, and 12) | | | | | | |
| | First five years. If the Form 990 is for check this box and stop here | | · | | x year as a section | n 501(c)(3) organiz | eation, |
| Sec | tion C. Computation of Publi | c Support Per | centage | | | | |
| | Public support percentage for 2014 (li | | • | olumn (f)) | | 15 | 100.00 % |
| | Public support percentage from 2013 | | | | | 16 | 100.00 % |
| | tion D. Computation of Inves | | | | | | 00 |
| | Investment income percentage for 20 | • | • • | e 13, column (f)) | | 17 | .00 % |
| | Investment income percentage from 2 | | | | | 18 | % |
| 19a | 33 1/3% support tests - 2014. If the | | | | | | |
| b | more than 33 1/3%, check this box ar 33 1/3% support tests - 2013. If the | - | - | · · | · · | | ▶ 【X】 and |
| | line 18 is not more than 33 1/3%, che | ck this box and ste | op here. The organ | nization qualifies a | s a publicly suppo | orted organization | ▶□ |
| 20 | Private foundation. If the organization | n did not check a b | oox on line 14, 19a | , or 19b, check thi | | | 0 or 990-FZ) 2014 |

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)

| Section A | A. All | Supporting | Organizations |
|-----------|--------|------------|---------------|
|-----------|--------|------------|---------------|

- 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

| 1 | | Yes | No |
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| າ 9 | 90 or 99 | O-EZ) | 2014 |

the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations Answer (a) and (b) below.

a 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*.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in *Part VI* the role played by the organization in this regard

2b 3a 3b

2a

432025 09-17-14

AMERICAN FRIENDS OF AMALEH SHEL

| | dule A (Form 990 or 990-EZ) 2014 TORAH , INC . | | | 22-3758699 Page 6 |
|------|---|--------------|------------------------------|--------------------------------|
| Pai | t V Type III Non-Functionally Integrated 509(a)(3) Supporting | ng Orga | nizations | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | ng trust or | n Nov. 20, 1970 See instru | uctions. All |
| | other Type III non-functionally integrated supporting organizations must co | omplete S | Sections A through E | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | ··· | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 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 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| 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). | ļ | | |
| a | Average monthly value of securities | 1a | | |
| | Average monthly cash balances | 1b | | |
| | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other | | | |
| | factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, | | | |
| | see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | *** | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| - | emergency temporary reduction (see instructions) | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | ılly-ıntegra | ited Type III supporting org | janization (see |
| | instructions) | | | |

| Pai | rt V | Type III Non-Functionally Integrated 509 | (a)(3) Supporting Orga | anizations (continued) | | | |
|----------|--|--|-------------------------------|------------------------|---------------------------------------|--|--|
| Secti | ion D - [| Distributions | | | Current Year | | |
| _1_ | Amounts paid to supported organizations to accomplish exempt purposes | | | | | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported | | | | | | |
| | organizations, in excess of income from activity | | | | | | |
| 3_ | Adminis | strative expenses paid to accomplish exempt purpose | es of supported organization | ıs | | | |
| 4 | Amoun | ts paid to acquire exempt-use assets | | | | | |
| 5 | Qualifie | d set-aside amounts (prior IRS approval required) | | | | | |
| 6_ | Other d | istributions (describe in Part VI). See instructions. | | | | | |
| 7 | Total a | nnual distributions. Add lines 1 through 6. | | | | | |
| 8 | Distribu | itions to attentive supported organizations to which the | ne organization is responsive | e | | | |
| | (provide | e details in Part VI). See instructions. | | | | | |
| 9 | Distribu | table amount for 2014 from Section C, line 6 | | | | | |
| 10 | Line 8 a | amount divided by Line 9 amount | | | | | |
| | | | (i) | (ii) | (iii) | | |
| C4 | F F | Nickely Allegations (and instrume) | Excess Distributions | Underdistributions | Distributable | | |
| Sect | ion E - L | Distribution Allocations (see instructions) | | Pre-2014 | Amount for 2014 | | |
| _1_ | Distribu | table amount for 2014 from Section C, line 6 | | | | | |
| 2 | Underd | istributions, if any, for years prior to 2014 | | | | | |
| | (reason | able cause required-see instructions) | | | | | |
| 3 | Excess | distributions carryover, if any, to 2014: | <u> </u> | | | | |
| a | | | · · · · · | | · · · · · · · · · · · · · · · · · · · | | |
| <u>b</u> | | | | | | | |
| <u> </u> | | | | | | | |
| d | | | | <u>.</u> | | | |
| е_ | From 2 | 013 | · · | | | | |
| f | Total o | f lines 3a through e | | | | | |
| g | Applied | to underdistributions of prior years | | | | | |
| h | Applied | to 2014 distributable amount | | | | | |
| i_ | | ver from 2009 not applied (see instructions) | | | | | |
| _i_ | | der Subtract lines 3g, 3h, and 3i from 3f. | · | | | | |
| 4 | Distribu | itions for 2014 from Section D, | | | | | |
| | line 7 | \$ | | | | | |
| a | Applied | to underdistributions of prior years | | | | | |
| | | to 2014 distributable amount | | | | | |
| | | der Subtract lines 4a and 4b from 4. | | | | | |
| 5 | | ing underdistributions for years prior to 2014, if | | | | | |
| | | btract lines 3g and 4a from line 2 (if amount | | | | | |
| | | than zero, see instructions). | | | | | |
| 6 | | ing underdistributions for 2014. Subtract lines 3h | | | | | |
| | | from line 1 (if amount greater than zero, see | | | | | |
| | instruct | / | | | | | |
| 7 | | distributions carryover to 2015. Add lines 3 | | | | | |
| | and 4c | · · · · · · · · · · · · · · · · · · · | | | | | |
| _8_ | Breakd | own of line 7. | | | | | |
| <u>a</u> | | | <u> </u> | · | | | |
| <u> </u> | | | | | | | |
| <u>C</u> | | | | | | | |
| | | from 2013 | | | | | |
| e | Excess | from 2014 | | | | | |

AMERICAN FRIENDS OF AMALEH SHEL 22-3758699 Page 8 Schedule A (Form 990 or 990-EZ) 2014 TORAH, INC. 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).

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Employer identification number Name of the organization AMERICAN FRIENDS OF AMALEH SHEL 22-3758699 INC. TORAH, General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (e) If activity listed in (d) (f) Total (d) Activities conducted in region (a) Region expenditures émployees, agents, and offices (by type) (e.g., fundraising, program is a program service, for and services, investments, grants to describe specific type in the region ındependent investments contractors recipients located in the region) of service(s) in region in region in region THE ORGANIZATION PROVIDES AMALEH SHEL TORAH IS A NON PROFIT EDUCATIONAL FUNDS TO A RECOGNIZED NON INSTITUTION IN ISRAEL 339550. PROFIT EDUCATIONAL ENTITY O 339550. 3 a Sub-total b Total from continuation sheets to Part I 0. c Totals (add lines 3a 339550. and 3b)

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Schedule F (Form 990) 2014

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

Page 2

22-3758699

Schedule F (Form 990) 2014

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

| (i) Method of valuation (book, FMV, appraisal, other) | | | : | | 1 | 0 |
|---|--|--|---|--|--|--|
| (h) Description of non-cash assistance | | | | | | |
| (g) Amount of non-cash assistance | 0 | | | | xempt by ▶ | A |
| (f) Manner of cash disbursement | CHECKS | | | | recognized as tax-e | |
| (e) Amount of cash grant | 339550 | | | | foreign country, | |
| (d) Purpose of grant | THE ORGANIZATION PROVIDES FUNDS TO AMALEH SHEL TORAH - A RECOGNIZED NON PROFIT | | | | Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter | |
| (c) Region | ISRAEL | | | | ns listed above that are el has provided a sectio | · · · · · · · · · · · · · · · · · · · |
| (b) IRS code section and EIN (if applicable) | | | | | recipient organizatio | continuo you contaminate and a selection of the selection |
| 1 (a) Name of organization | | | | | 2 Enter total number of the IRS. or for which t | L |

See Part V for Column (d) descriptions 28

Schedule F (Form 990) 2014

AMERICAN FRIENDS OF AMALEH SHEL TORAH, INC.

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16
Part III can be duplicated if additional space is needed

Page 3

22-3758699

| , , | · | ı | 1 | | 1 | | | | |
|---|---|---|---|--|---|--|---|--|--|
| (h) Method of, valuation (book, FMV, appraisal, other) | | | | | | | - | | |
| (g) Description of non-cash assistance | | | | | | | | | |
| (f) Amount of non-cash assistance | | | | | | | | | |
| (e) Manner of cash disbursement | | | | | | | | | |
| (d) Amount of cash grant | | | | | | | | | |
| (c) Number of recipients | | | | | | | | | |
| (b) Region | | | | | | | | | |
| (a) Type of grant or assistance | | | | | | | | | |

Schedule F (Form 990) 2014

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2014

Yes X No

for Form 5713, do not file with Form 990)

SCHEDULE 0 (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.

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

Open to Public

OMB No 1545-0047

Inspection

Internal Revenue Service Name of the organization

AMERICAN FRIENDS OF AMALEH SHEL TORAH

Employer identification number 22-3758699

| 101411, 1110. |
|--|
| Form 990, Part VI, Section B, line 11: |
| DRAFT COPY IS GIVEN TO GOVERNING BOARD FOR REVIEW & TO BE SIGNED BY OFFICER |
| DIGIT COLL ID OLVER TO COVERENCE DOLLER TO HEAVE TO THE TENER OF THE T |
| |
| Form 990, Part VI, Section C, Line 19: |
| ALL GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE TO THE PUBLIC UPON |
| ALL GOVERNING DOCUMENTS THAT TOLICIDS THE TWINDER TO THE TOLIC OF THE |
| REQUEST |
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