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Return of Private Foundation  
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

2014

Department of the Treasury  
Internal Revenue Service

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▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2014, or tax year beginning , 2014, and ending

Name of foundation <b>Wexner Foundation</b>		<b>A</b> Employer identification number <b>23-7320631</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>8000 Walton Parkway</b>	Room/suite <b>100</b>	<b>B</b> Telephone number (see instructions) <b>(614) 939-6060</b>
City or town, state or province, country, and ZIP or foreign postal code <b>New Albany Oh 43054</b>		<b>C</b> If exemption application is pending, check here. <input type="checkbox"/>
<b>G</b> Check all that apply:		<b>D</b> 1 Foreign organizations, check here. . . . . <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<b>2</b> Foreign organizations meeting the 85% test, check here and attach computation. . . . . <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here. . . . . <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. . . . . <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
<b>I</b> Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ <b>5,171,973.</b>	<b>J</b> Accounting method. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>1</b> Contributions, gifts, grants, etc. received (attach schedule) . . . . .		11,267,001.			
<b>2</b> Ck <input type="checkbox"/> If the foundn is not required to attach Sch B					
<b>3</b> Interest on savings and temporary cash investments . . . . .		745.	745.	745.	
<b>4</b> Dividends and interest from securities . . . . .					
<b>5a</b> Gross rents . . . . .					
<b>b</b> Net rental income or (loss) . . . . .					
<b>6a</b> Net gain or (loss) from sale of assets not on line 10 . . . . .		-192,504.	L-6a Stmt		
<b>b</b> Gross sales price for all assets on line 6a . . . . .		0.			
<b>7</b> Capital gain net income (from Part IV, line 2) . . . . .					
<b>8</b> Net short-term capital gain . . . . .					
<b>9</b> Income modifications . . . . .					
<b>10a</b> Gross sales less returns and allowances . . . . .					
<b>b</b> Less Cost of goods sold . . . . .					
<b>c</b> Gross profit or (loss) (attach schedule) . . . . .					
<b>11</b> Other income (attach schedule) . . . . .					
<b>12</b> Total. Add lines 1 through 11. . . . .		11,075,242.	745.	745.	
<b>ADMINISTRATIVE AND OPERATING EXPENSES</b>	<b>13</b> Compensation of officers, directors, trustees, etc. . . . .	1,128,764.			1,128,764.
	<b>14</b> Other employee salaries and wages . . . . .	1,935,227.			1,935,227.
	<b>15</b> Pension plans, employee benefits . . . . .	775,675.			775,675.
	<b>16a</b> Legal fees (attach schedule) . . L-16a Stmt.	56,569.			56,569.
	<b>b</b> Accounting fees (attach sch) . . L-16b Stmt.	59,304.			59,304.
	<b>c</b> Other prof fees (attach sch) . . L-16c Stmt.	463,770.			463,770.
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule)(see instrs) State Filing Fees.	555.			555.
	<b>19</b> Depreciation (attach sch) and depletion . . . . .	66,770.			
	<b>20</b> Occupancy . . . . .	705,053.			705,053.
	<b>21</b> Travel, conferences, and meetings . . . . .	2,531,756.			2,531,756.
	<b>22</b> Printing and reproduction . . . . .	68,173.			68,173.
	<b>23</b> Other expenses (attach schedule) . . . . .	609,609.			609,609.
	<b>24</b> Total operating and administrative expenses. Add lines 13 through 23 . . . . .	8,401,225.			8,334,455.
<b>25</b> Contributions, gifts, grants paid . . . . .	2,328,486.			2,328,486.	
<b>26</b> Total expenses and disbursements. Add lines 24 and 25 . . . . .	10,729,711.			10,662,941.	
<b>27</b> Subtract line 26 from line 12. . . . .					
<b>a</b> Excess of revenue over expenses and disbursements . . . . .	345,531.				
<b>b</b> Net Investment Income (if negative, enter -0-) . . . . .		745.			
<b>c</b> Adjusted net income (if negative, enter -0-) . . . . .			745.		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
ASSETS	1	Cash — non-interest-bearing . . . . .		141,951.	278,302.	278,302.
	2	Savings and temporary cash investments . . . . .		724,041.	859,070.	859,070.
	3	Accounts receivable . . . . . ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable . . . . . ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable . . . . .				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .				
	7	Other notes and loans receivable (attach sch) . ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .		526,615.	757,128.	757,128.
	10a	Investments — U.S. and state government obligations (attach schedule) . . . . .				
	b	Investments — corporate stock (attach schedule) . . . . .				
	c	Investments — corporate bonds (attach schedule) . . . . .				
	LIABILITIES	11	Investments — land, buildings, and equipment: basis . . . . . ▶			
		Less: accumulated depreciation (attach schedule) . . . . . ▶				
12		Investments — mortgage loans . . . . .				
13		Investments — other (attach schedule) . . . . .				
14		Land, buildings, and equipment: basis . . . . . 3,565,817.				
		Less: accumulated depreciation (attach schedule) . . . . . ▶ 288,344.		3,364,062.	3,277,473.	3,277,473.
15		Other assets (describe . . . . . )				
16		<b>Total assets</b> (to be completed by all filers — see the instructions. Also, see page 1, item I). . . . .		4,756,669.	5,171,973.	5,171,973.
17		Accounts payable and accrued expenses . . . . .				
18		Grants payable . . . . .				
NET UNRESTRICTED ASSETS OR FUND BALANCES	19	Deferred revenue . . . . .				
	20	Loans from officers, directors, trustees, & other disqualified persons . . . . .				
	21	Mortgages and other notes payable (attach schedule) . . . . .				
	22	Other liabilities (describe . . . . . )				
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .				
		<b>Foundations that follow SFAS 117, check here . . . . .</b> ▶ <input type="checkbox"/>				
		<b>Foundations that do not follow SFAS 117, check here . . . . .</b> ▶ <input checked="" type="checkbox"/> X				
24	Unrestricted . . . . .					
25	Temporarily restricted . . . . .					
26	Permanently restricted . . . . .					
27	Capital stock, trust principal, or current funds . . . . .		4,756,669.	5,171,973.		
28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .					
29	Retained earnings, accumulated income, endowment, or other funds . . . . .					
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .		4,756,669.	5,171,973.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .		4,756,669.	5,171,973.		

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	4,756,669.
2	Enter amount from Part I, line 27a . . . . .	2	345,531.
3	Other increases not included in line 2 (itemize) . . . . . ▶ See Other Increases Stmt	3	80,240.
4	Add lines 1, 2, and 3 . . . . .	4	5,182,440.
5	Decreases not included in line 2 (itemize) . . . . . ▶ Depreciation	5	10,467.
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 . . . . .	6	5,171,973.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)

(b) How acquired  
P — Purchase  
D — Donation(c) Date acquired  
(month, day, year)(d) Date sold  
(month, day, year)

1 a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss). . . . . [ If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 ] . . . . .

2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-  
in Part I, line 8 . . . . .

3

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . . ☐ Yes ☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2013	10,765,285.	5,214,134.	2.064635
2012	9,473,163.	5,434,552.	1.743136
2011	9,125,149.	5,559,962.	1.641225
2010	8,207,361.	4,832,244.	1.698457
2009	8,728,205.	5,512,948.	1.583219

2 Total of line 1, column (d) . . . . . 2 8.730672

3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the  
number of years the foundation has been in existence if less than 5 years . . . . . 3 1.746134

4 Enter the net value of nonchantable-use assets for 2014 from Part X, line 5. . . . . 4 5,411,509.

5 Multiply line 4 by line 3 . . . . . 5 9,449,220.

6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . . 6 7.

7 Add lines 5 and 6. . . . . 7 9,449,227.

8 Enter qualifying distributions from Part XII, line 4 . . . . . 8 10,662,941.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the  
Part VI instructions.

**Part VI Excise Tax Based on Investment Income** (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instrs)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	7.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	7.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	7.
6 Credits/Payments:			
a 2014 estimated tax pmts and 2013 overpayment credited to 2014	6 a	374.	
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c	0.	
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d	7	374.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	367.	
11 Enter the amount of line 10 to be Credited to 2015 estimated tax	367.	Refunded	11

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) See States Registered In _____		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	X	
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

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**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) . . . . .	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions). . . . .	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . . . . . Website address . . . . . <u>www.wexnerfoundation.org</u>	13	X	
14	The books are in care of <u>Peggy Ugland</u> Telephone no. <u>(614) 939-6000</u> Located at <u>8000 Walton Parkway, Suite 100 New Albany OH</u> ZIP + 4 <u>43054</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <u>15</u>			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If 'Yes,' enter the name of the foreign country <u>IS</u>	16	X	
			Yes	No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

		Yes	No
1 a	During the year did the foundation (either directly or indirectly).		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
1 b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1 b	X
1 c	Did the foundation engage in a prior year in any of the acts described in 1 a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014? . . . . .	1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u> .		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions) . . . . .	2 b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u> .		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014) . . . . .	3 b	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4 a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? . . . . .	4 b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5 a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870.

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Leslie H. Wexner 8000 Walton Parkway, Suite 100 New Albany OH 43054	Trustee 1.00	0.	0.	0.
Barbara Abrahamson 2123 Fair Ave. Bexley OH 43209	President 40.00	546,618.	23,406.	0.
Dennis S. Hersch 60 East 42nd St., Suite 1700 NY NY 10165	Secretary, Trustee 5.00	250,000.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		332,146.	23,406.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Benjamin Berger 157 S. Ardmore Rd. Bexley OH 43209	Program Director 40.00	114,415.	6,702.	0.
Gordon I. Mars 249 S. Cassady Ave. Bexley OH 43209	Director, Graduate Fellowship Program 40.00	184,215.	14,579.	0.
Larry Moses 300 South Drexel Bexley OH 43209	Senior Philanthropic Advisor 40.00	343,371.	23,406.	0.
Lori Baron 240 East 39th St, Apt 36K NY NY 10016	Director, Operations 40.00	147,038.	10,195.	0.
Angie Adkins 645 West End Ave., 1A NY NY 10025	Director, Wexner Heritage Alumni 40.00	128,230.	8,098.	0.
Total number of other employees paid over \$50,000				5

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Rabbi Maurice Corson 181 East 81 St., Apt 11B New York NY 10028	Rabbinical Advisory Services	89,336.
Rabbi Jay Moses 120 S. Cassingham Rd. Columbus OH 43209	Rabbinical Advisory Services	141,281.
Gordon Hecker 363 N. Drexel Ave. Bexley OH 43209	Program Development&Review	150,000.
Brian Mandell 66 Parkman St, Unit 1 Brookline MA 02446	Program Consultant	55,000.
Proskauer Rose LLP 2255 Glades Rd., Suite 421 Boca Raton FL 33431	Legal	80,784.
Total number of others receiving over \$50,000 for professional services		1

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 Religious education program to strengthen Jewish community leaders through intensive study of text in bible, history, philosophy and law led by experienced clergy & faculty. Statement 7thru8 for curriculum.	1,587,331.
2 Leadership development program for mid-career leaders in Israel's public sector. Wexner Israel Fellowship Program is unique partnership between Wexner Foundation, Israel Civil Service and Harvard. Eligibility Form Attached.	1,744,053.
3 Wexner Graduate Fellowship/Davidson Scholars program provides leadership development for Jewish communal professionals in graduate schools. Program application attached.	3,199,573.
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 None	0.
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	None

BAA

Form 990-PF (2014)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1 a</b>	
<b>b</b>	Average of monthly cash balances . . . . .	<b>1 b</b>	1,459,317.
<b>c</b>	Fair market value of all other assets (see instructions) . . . . .	<b>1 c</b>	4,034,601.
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1 d</b>	5,493,918.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1 e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	5,493,918.
<b>4</b>	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) . . . . .	<b>4</b>	82,409.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	5,411,509.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	270,575.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	
<b>2 a</b>	Tax on investment income for 2014 from Part VI, line 5 . . . . .	<b>2 a</b>	
<b>b</b>	Income tax for 2014. (This does not include the tax from Part VI.) . . . . .	<b>2 b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2 c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions) . . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 . . . . .	<b>1 a</b>	10,662,941.
<b>b</b>	Program-related investments — total from Part IX-B. . . . .	<b>1 b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3 a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3 b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	10,662,941.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) . . . . .	<b>5</b>	7.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	10,662,934.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
<b>1</b> Distributable amount for 2014 from Part XI, line 7 . . . . .				
<b>2</b> Undistributed income, if any, as of the end of 2014				
<b>a</b> Enter amount for 2013 only . . . . .			0.	
<b>b</b> Total for prior years. 20 __, 20 __, 20 __				
<b>3</b> Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009 . . . . .	0.			
<b>b</b> From 2010 . . . . .	0.			
<b>c</b> From 2011 . . . . .	0.			
<b>d</b> From 2012 . . . . .	0.			
<b>e</b> From 2013 . . . . .	0.			
<b>f</b> Total of lines 3a through e . . . . .	0.			
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4: ► \$ 10,662,941.				
<b>a</b> Applied to 2013, but not more than line 2a . . . . .				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions) . . . . .				
<b>c</b> Treated as distributions out of corpus (Election required — see instructions) . . . . .				
<b>d</b> Applied to 2014 distributable amount . . . . .				
<b>e</b> Remaining amount distributed out of corpus . . . . .	0.			
<b>5</b> Excess distributions carryover applied to 2014 . . . . . (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5 . . . . .	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0.		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount — see instructions . . . . .		0.		
<b>e</b> Undistributed income for 2013 Subtract line 4a from line 2a. Taxable amount — see instructions . . . . .			0.	
<b>f</b> Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 . . . . .				0.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) . . . . .				
<b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . . .	0.			
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	0.			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2010 . . . . .	0.			
<b>b</b> Excess from 2011 . . . . .	0.			
<b>c</b> Excess from 2012 . . . . .	0.			
<b>d</b> Excess from 2013 . . . . .	0.			
<b>e</b> Excess from 2014 . . . . .	0.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . . N/A

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

	Prior 3 years				(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	745.	1,076.	1,101.	866.	3,788.
<b>b</b> 85% of line 2a . . . . .	633.	915.	936.	736.	3,220.
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	10,662,941.	10,765,296.	9,473,163.	9,125,148.	40,026,548.
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .	2,328,486.	2,185,205.	2,182,980.	1,926,155.	8,622,826.
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	8,334,455.	8,580,091.	7,290,183.	7,198,993.	31,403,722.
<b>3</b> Complete 3a, b, or c for the alternative test relied upon.					
<b>a</b> 'Assets' alternative test — enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .	180,383.	173,804.	184,569.	185,332.	724,088.
<b>c</b> 'Support' alternative test — enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

Leslie H. Wexner

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

Barbara Abrahamson, President  
8000 Walton Parkway, Suite 110  
New Albany OH 43054 (614) 939-6060

- b** The form in which applications should be submitted and information and materials they should include

See Attached Pages 10 thru 19

- c** Any submission deadlines:

See Attached Pages 10 thru 19

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See Attached Pages 10 thru 19

**Part XV** Supplementary Information (continued)**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year See attached schedule of grants on attached pages 5 thru 6. OH 43054		Attached	Attached	2,328,486.
<b>Total</b> . . . . .			<b>3 a</b>	2,328,486.
<b>b</b> Approved for future payment				
<b>Total</b> . . . . .			<b>3 b</b>	

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
<b>1</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies . . .					
<b>2</b> Membership dues and assessments . . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . .			14	745.	
<b>4</b> Dividends and interest from securities . . . . .					
<b>5</b> Net rental income or (loss) from real estate:					
<b>a</b> Debt-financed property . . . . .					
<b>b</b> Not debt-financed property . . . . .					
<b>6</b> Net rental income or (loss) from personal property . . . . .					
<b>7</b> Other investment income . . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . .			18	-192,504.	
<b>9</b> Net income or (loss) from special events . . . . .					
<b>10</b> Gross profit or (loss) from sales of inventory . . . .					
<b>11</b> Other revenue.					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e) . . . . .				-191,759.	
<b>13</b> Total. Add line 12, columns (b), (d), and (e) . . . . .				-191,759.	

(See worksheet in line 13 instructions to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

## a Transfers from the reporting foundation to a noncharitable exempt organization of:

(1) Cash . . . . . **1 a (1)** Yes No X

(2) Other assets . . . . . **1 a (2)** Yes No X

## b Other transactions.

(1) Sales of assets to a noncharitable exempt organization . . . . . **1 b (1)** Yes No X

(2) Purchases of assets from a noncharitable exempt organization . . . . . **1 b (2)** Yes No X

(3) Rental of facilities, equipment, or other assets . . . . . **1 b (3)** Yes No X

(4) Reimbursement arrangements . . . . . **1 b (4)** Yes No X

(5) Loans or loan guarantees . . . . . **1 b (5)** Yes No X

(6) Performance of services or membership or fundraising solicitations . . . . . **1 b (6)** Yes No X

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . . **1 c** Yes No X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

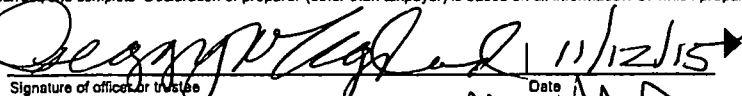
- 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

## b If 'Yes,' complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

 11/12/15

TREASURER

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name MICHELE ROSENBERG Preparer's signature MICHELE ROSENBERG Date 11/10/15 Check ☐ If self-employed PTIN P01346138

Firm's name CORNICK, GARBER & SANDLER LLP Firm's EIN 13-2620561

Firm's address 825 THIRD AVENUE NEW YORK, NY 10022 Phone no (212) 557-3900

BAA

Form 990-PF (2014)

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2014**

Name of the organization

Wexner Foundation

Employer identification number

23-7320631

**Organization type** (check one).

**Filers of:**

Form 990 or 990-EZ

**Section:**

- ☐ 501(c)( ) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation  
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation  
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the **General Rule** and a **Special Rule**. See instructions

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions

**Special Rules**

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

Wexner Foundation

23-7320631

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jewish Foundation of Cincinnati 4555 Lake Forest Drive, #645 Cincinnati OH 45242	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Genesis Philanthropy Group 2 Kaplan St Tel Aviv, IS	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	William Davidson Foundation 2 Town Square, Suite 905 Southfield MI 48076	\$ 2,290,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Wexner Family Charitable Fund 8000 Walton Parkway, Suite 100 New Albany OH 43054	\$ 7,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Jewish Federation of Greater Dallas 7800 Northaven Rd. Dallas TX 75230	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Jewish Federation of Greater Washington 6101 Montrose Rd. Rockville MD 20852	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

Employer identification number

Wexner Foundation

23-7320631

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Jim Joseph Foundation 343 Sansome St., Suite 1200 San Francisco CA 94104	\$ 709,917.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
8	Jewish Federation of St. Louis 12 Millstone Campus Dr. Saint Louis MO 63146	\$ 233,334.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
9	Jewish Federation of Greater Hartford 333 Bloomfield Avenue, Suite C West Hartford CT 06117	\$ 77,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Jewish Community Federation of San Francisco 121 Steuart Street San Francisco CA 94105	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
11	Jewish Colorado 300 South Dahlia St., #300 Denver CO 80246	\$ 82,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	Jewish Federation of Greater New Haven 360 Amity Rd. Woodbridge CT 06525	\$ 36,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

Wexner Foundation

23-7320631

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Jewish Endowment Foundation of Western Massachusetts 1160 Dickinson St. Springfield MA 01108	\$ 17,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
14	Rose Foundation 600 S. Cherry St., Suite 1200 Denver CO 80246	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

THE WEXNER FOUNDATION  
2014 DEPRECIATION SCHEDULE  
23-7320631  
12-31-2014

Date	Description	Cost	Method	2014 Depreciation	Accu Depreciation
<hr/>					
	Furniture, Fixtures & Equipment				
<hr/>					
	Furniture & Fixtures				
<hr/>					
88-89	Office Furniture	55,908 00	10yr S/L	0 00	55,908.00
10-88	Roche Buboi - Table	3,516.00	10yr S/L	0 00	3,516.00
10-88	Continental Office - Furniture & Cabinets	15,665 00	10yr S/L	0.00	15,665.00
12-88	Continental Office - Furniture & Cabinets	5,274.00	10yr S/L	0 00	5,274.00
12-88	Art Exchange - Paintings	3,010 00	10yr S/L	0 00	3,010 00
12-88	M A. Fox - Credenza	3,810.00	10yr S/L	0 00	3,810.00
12-88	M A. Fox - Conference Table	5,385 00	10yr S/L	0 00	5,385.00
2-89	Continental-Radius Board	1,073 00	10yr S/L	0.00	1,073.00
2-89	Forbus-Table	3,225 00	10yr S/L	0.00	3,225 00
2-89	Continental-Files	1,413.00	10yr S/L	0.00	1,413.00
1-89	Builders Appliance-Refridge	1,248 00	10yr S/L	0.00	1,248.00
11-00	Office Furniture	38,939.80	10yr S/L	0 00	38,939.80
5-03	Telephone Equipment	5,991.18	10yr S/L	0.00	5,991.18
9-05	Office Furniture	15,442 49	10yr S/L	1,544 25	14,670.37
8-06	Office Furniture	4,379 00	10yr S/L	437.90	3,722.15
9-10	Office Furniture -NY	189,005 00	5yr S/L	18,901.00	151,205.00
	retired Office Furniture	-189,005.00			-151,205.00
6-11	Office Furniture-Columbus	40,553 00	5yr S/L	8,111.00	20,277 00
6-11	Computer Equip	35,548 00	5yr S/L	7,110.00	17,775.00
4-30-12	Office Equip	23,191 00	5yr S/L	4,638.00	11,595.00
12-13-12	Computer	1,594.43	5yr S/L	319.00	797.00
1-31-13	Computer	2,528.00	5yr S/L	506.00	759.00
2-27-13	Office Furniture	3,904 39	5yr S/L	781.00	1,171.00
1-1-14	Mac 13	1,930.99	5yr S/L	193.00	193.00
1-1-14	Firewall	4,225 00	5yr S/L	423 00	423.00
8-20-14	Furniture-Columbus	3,110.24	5yr S/L	311 00	311 00
4-22-14	Furniture-NY	72,617.01	5yr S/L	7,262.00	7,262 00
5-23-14	snap as professional,scanner,projector-Colum	19,629.00	5yr S/L	1,963.00	1,963.00
7-15-14	Apple Laptop	3,686 00	5yr S/L	367.00	367.00
12-23-14	Mac Book	2,355 93	5yr S/L	236.00	236 00
8-14-14	Filing Cabinets-NY	2,640.52	5yr S/L	264.00	264.00
12-23-14	Firewall-NY	2,257 25	5yr S/L	226.00	226.00
6-14-14	Office Furniture-IS	9,451 23	5yr S/L	945 00	945.00
		\$393,501 46		\$54,538.15	\$227,414.50
		=====		=====	=====
<hr/>					
	Leasehold Improvements-New York				
<hr/>					
9-10	Improvements-New York	41,214 00	10yr SL	0.00	13,737 00
4-11	Improvements-New York	169,637.00	10yr SL	0.00	42,410 00
	Retire Old NY lease IMPROVEMENTS	-210,851.00		0.00	-56,147.00
1-12	Improvements-Columbus	80,861.00	10yr SL	8,086.00	20,215.00
8-14	Improvements-Columbus	6,399.00	10yr SL	640 00	640.00
7-1-14	New NY Lease-IMPROVEMENTS	35,055.36	5YR SL	3,506.00	3,506.00
		122,315 36		12,232.00	24,361.00
Total Depreciation				66,770.15	
				=====	

**Form 990-PF**  
**Part I, Line 6a**

**Net Gain or Loss From Sale of Assets**

**2014**

Name Wexner Foundation	Employer Identification Number 23-7320631
---------------------------	--

**Asset Information:**

Description of Property . . . . . <u>Abandoned Leasholds</u>	
Date Acquired: . . <u>various</u>	How Acquired . . . . . _____
Date Sold: . . . <u>various</u>	Name of Buyer: . . . . . _____
Sales Price: . . . . . <u>0.</u>	Cost or other basis (do not reduce by depreciation) . . . . . <u>154,704.</u>
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . <u>-154,704.</u>	Accumulation Depreciation: . . . . . _____
Description of Property . . . . . <u>Abandoned Fixtures</u>	
Date Acquired: . . <u>various</u>	How Acquired: . . . . . _____
Date Sold: . . . <u>various</u>	Name of Buyer: . . . . . _____
Sales Price: . . . . . <u>0.</u>	Cost or other basis (do not reduce by depreciation) . . . . . <u>37,800.</u>
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . <u>-37,800.</u>	Accumulation Depreciation: . . . . . _____
Description of Property: . . . . . _____	
Date Acquired . . . . . _____	How Acquired . . . . . _____
Date Sold: . . . . . _____	Name of Buyer: . . . . . _____
Sales Price . . . . . _____	Cost or other basis (do not reduce by depreciation) . . . . . _____
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . _____	Accumulation Depreciation: . . . . . _____
Description of Property: . . . . . _____	
Date Acquired: . . . . . _____	How Acquired . . . . . _____
Date Sold: . . . . . _____	Name of Buyer: . . . . . _____
Sales Price: . . . . . _____	Cost or other basis (do not reduce by depreciation) . . . . . _____
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . _____	Accumulation Depreciation: . . . . . _____
Description of Property . . . . . _____	
Date Acquired . . . . . _____	How Acquired . . . . . _____
Date Sold: . . . . . _____	Name of Buyer: . . . . . _____
Sales Price: . . . . . _____	Cost or other basis (do not reduce by depreciation) . . . . . _____
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . _____	Accumulation Depreciation: . . . . . _____
Description of Property: . . . . . _____	
Date Acquired: . . . . . _____	How Acquired: . . . . . _____
Date Sold: . . . . . _____	Name of Buyer: . . . . . _____
Sales Price: . . . . . _____	Cost or other basis (do not reduce by depreciation) . . . . . _____
Sales Expense . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss) . . . . . _____	Accumulation Depreciation: . . . . . _____
Description of Property: . . . . . _____	
Date Acquired . . . . . _____	How Acquired . . . . . _____
Date Sold: . . . . . _____	Name of Buyer: . . . . . _____
Sales Price: . . . . . _____	Cost or other basis (do not reduce by depreciation) . . . . . _____
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . _____	Accumulation Depreciation: . . . . . _____
Description of Property: . . . . . _____	
Date Acquired: . . . . . _____	How Acquired: . . . . . _____
Date Sold: . . . . . _____	Name of Buyer: . . . . . _____
Sales Price: . . . . . _____	Cost or other basis (do not reduce by depreciation) . . . . . _____
Sales Expense: . . . . . _____	Valuation Method: . . . . . _____
Total Gain (Loss): . . . . . _____	Accumulation Depreciation: . . . . . _____

## Form 990-PF, Page 1, Part I, Line 23

## Line 23 Stmt

Other expenses*	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Insurance	14,703.			14,703.
Repairs & Maintenance	70,539.			70,539.
Office Supplies, Postage & Misc	38,840.			38,840.
Security & Delivery	4,530.			4,530.
Moving & Other	12,126.			12,126.
Honoraria	145,969.			145,969.
Dues	300.			300.
Computer Expense	89,371.			89,371.
Parsonage	125,673.			125,673.
Continuing Education	3,204.			3,204.
Program Review	75,000.			75,000.
Telephone	21,611.			21,611.
Bank Charges	4,937.			4,937.
Temporary Help	2,806.			2,806.
Total	609,609.			609,609.

## Form 990-PF, Page 2, Part III, Line 3

## Other Increases Stmt

Book/Tax Difference on Fixed assets abandoned	19,795.
Deferred Compensation-FMV Adjustment	60,445.
Total	80,240.

## Form 990-PF, Page 4, Part VII-A, Line 8a

## States Registered In

OH - Ohio

NY - New York

## Form 990-PF, Page 6, Part VIII, Line 1

## Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person.. <input checked="" type="checkbox"/> Business . <input type="checkbox"/> Abigail S. Wexner One Whitebarn Rd. New Albany OH 43054	Trustee 1.00	0.	0.	0.
Person.. <input checked="" type="checkbox"/> Business . <input type="checkbox"/> Peggy W. Ugland 8000 Walton Parkway, Suite 100 New Albany OH 43054	Treasurer 1.00	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1

Continued

## Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person.. <input checked="" type="checkbox"/> Business . <input type="checkbox"/> Cynthia Chazan 53 Speir Dr. S. Orange NJ 07079	VP 40.00	332,146.	23,406.	0.
Person.. <input checked="" type="checkbox"/> Business . <input type="checkbox"/> Gideon Kaufman 315 E. Hymen Ave. Aspen CO 81611	Trustee 1.00	0.	0.	0.
Person.. <input checked="" type="checkbox"/> Business . <input type="checkbox"/>				

Total

332,146.      23,406.      0.

Form 990-PF, Page 1, Part I

## Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Vorys, Sater, Seymour & Pease	General Corporate	285.			285.
Zeiger, Tiggs & Little	General Corporate	1,079.			1,079.
Proskauer, Rose LLP	Lease Negotiation	51,408.			51,408.
Reshef & Shiff Advocates	General Corporate	3,797.			3,797.

Total 56,569.      56,569.

Form 990-PF, Page 1, Part I

## Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Ernst & Young	Financial Statements	35,591.			35,591.
Management Services LTD	Accounting	19,963.			19,963.
Cornick, Garber & Sandler, LLP	Accounting	3,750.			3,750.

Total 59,304.      59,304.

Form 990-PF, Page 1, Part I

**Line 16c - Other Professional Fees**

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADP	Payroll Processing	2,641.			2,641.
Rabbi Jay Moses	Rabbinical Advisory Fees	127,622.			127,622.
Rabbi Maurice Corson	Rabbinical Advisory Fees	80,000.			80,000.
Gordon Hecker	Program consultant	150,000.			150,000.
Joseph Kohane	Program Review	48,507.			48,507.
Brian Mandell	Program Consultant	55,000.			55,000.
Total		<u>463,770.</u>			<u>463,770.</u>

**Supporting Statement of:**

Form 990-PF, pl/Line 1(a)

Description	Amount
The Wexner Family Charitable Fund	7,000,000.
William Davidson Foundation	2,290,000.
Jim Joseph Foundation	709,917.
Jewish Community Federarion of San Francisco	175,000.
Genesis Philantropy	20,000.
Jewish Federation of St. Louis	233,334.
Jewish Foundation of Cincinnati	175,000.
Jewish Federation Of Greater Dallas	175,000.
Jewish Federation of Greater Washington	175,000.
Jewish Federation of Greater Hartford	77,750.
Jewish Endowment Foundation of Western Mass.	17,500.
Jewish Federation of Greater New Haven	36,000.
Rose Foundation	100,000.
Jewish Colorado	82,500.
Total	<u>11,267,001.</u>



The Wexner Foundation  
23-7320631  
FY 12-31-2014

Page 10, Part XVI, Line 3a-Grants	Date			Purpose	
United Way Of Franklin County 360 S Third St. Columbus, Ohio 43215 (501(c)3 Organization)	12-23-14	Cash	2,815	To fund community assistance programs	
Temple Israel 5419 E Broad St. Columbus, Ohio 43201 (501(c)3 Organization)	9-17-14	Cash	8,825	To Support Synagogue	
Jewish Funders Network 150 West 30th Street, Suite 900 New York, New York 10001 (501(c)3 Organization)	12-3-14	Cash	10,000	To provide educational funding	
The Jewish Federations of North America 60 East 42nd Street, #1700 New York, New York 10165 (501(c)3 Organization)	12-3-14	Cash	30,000	To provide educational funding	
Associated Jewish Community Federation of Baltimore Inc 101 W MT Royal Avenue Baltimore, MD 21201-5708 (501(c)3 Organization)	12-3-14	Cash	18,000	To provide educational funding	
Ravsak 254 West 54th Street, 11 Floor New York, New York 10019 (501(c)3 Organization)	7-8-14	Cash	5,000	To provide educational funding	
Valley Beit Midrash 4645 E Manlyn Rd Phoenix, Ar 85032 (501(c)3 Organization)	7-8-14	Cash	5,000	To provide educational funding	
Truah 333 7th Ave, 13th Floor New York, New York 10001 (501(c)3 Organization)	7-15-14	Cash	5,000	To provide educational funding	
Shalom Hartman Institute 1 Penn Plaza, Suite 1606 New York, New York 10119 (501(c)3 Organization)	7-24-14	Cash	5,000	To provide educational funding	
Temple Ahavat 18200 Rinaldi Place Northridge, Ca 91326 (501(c)3 Organization)	7-24-14	Cash	5,000	To provide educational funding	
University of Washington Box 353650 Seattle, Wa 98195 (501(c)3 Organization)	8-7-14	Cash	5,000	To provide educational funding	
Auburn Theological Seminary 3041 Broadway at 120th Street New York, New York 10027 (501(c)3 Organization)	8-15-14	Cash	5,000	To provide educational funding	
Mechon Hadar 190 Amsterdam Avenue New York, New York 10023 (501(c)3 Organization)	8-15-14	Cash	5,000	To provide educational funding	
ARCC Institute 2 Kerl Lane Spring Valley, NY 10977 (501(c)3 Organization)	10-31-14	Cash	5,000	To provide educational funding	
Anshe Emet Synagogue 3751 N Broadway Chicago, Il 60613 (501(c)3 Organization)	9-14-14	Cash	5,000	To provide educational funding	
Brandeis University 415 South Street Waltham, Ma 02454 (501(c)3 Organization)	10-7-14	Cash	5,000	To provide educational funding	
Ramah in the Rockies 5600 S Quebec St, 250C Greenwood Village, Co 80111 (501(c)3 Organization)	3-10-14	Cash	-5,000	REFUND Educational Grant (Grant Funds Disbursed 2013)	
Columbus Torah Academy 181 Noe Bixby Rd Columbus, Oh 43213 (501(c)3 Organization)	12-15-14	Cash	-5,000	REFUND Educational Grant (Grant Funds Disbursed 2013)	
Genesis Philanthropy Group 2 Kaplan St Tel Aviv, IS	12-10-14	Cash	30,708	REFUND Educational Grant (Grant Received 2013 & 2014)	

Fellowships-Paid During Calendar Year	Cash		
Hebrew Union College 3101 Clifton Ave Cincinnati, Ohio 45220 (501(c)3 Organization)	Cash	315,000	To fund educational fellowships
Yeshiva University 500 W 185th St New York, New York 10033 (501(c)3 Organization)	Cash	135,000	To fund educational fellowships
Jewish Theological Seminary Broadway And 122nd St New York, New York 10027 (501(c)3 Organization)	Cash	145,000	To fund educational fellowships
Hebrew College 160 Herick Rd Newton Centre, Ma 02459 (501(c)3 Organization)	Cash	110,000	To fund educational fellowships
Boston University 881 Commonwealth Ave Boston, Ma 02215 (501(c)3 Organization)	Cash	30,000	To fund educational fellowships
Yeshivat Maharat 3700 Henry Hudson Parkway, 2nd floor Bronx, NY 10463 (501(c)3 Organization)	Cash	15,000	To fund educational fellowships
American Jewish University 15600 Mulholland Dr Bel-Air, Ca 90077 (501(c)3 Organization)	Cash	60,000	To fund educational fellowships
Yeshivat Chovevei Torah Rabbinical School 550W 110th St New York, New York 10025 (501(c)3 Organization)	Cash	60,000	To fund educational fellowships
Georgetown University PO Box 571135 Washington, DC 20057 (501(c)3 Organization)	Cash	10,000	To fund educational fellowships
Hunter College 695 Park Ave., Room 236 Medford, Ma 02155 NY, NY 10065	Cash	15,000	To fund educational fellowships
Brandeis University 415 South Street Waltham, Mass 02254 (501(c)3 Organization)	Cash	30,000	To fund educational fellowships
Reconstructionist Rabbinical College Church Road & Greenwood Avenue Wyncote, Pa 19095 (501(c)3 Organization)	Cash	45,000	To fund educational fellowships
Harvard University Cambridge, Mass 02138 (501(c)3 Organization)	Cash	810 138	To fund educational fellowships
Stanford University 355 Galvez St Stanford, Ca 94305 (501(c)3 Organization)	Cash	80,000	To fund educational fellowship
New York University 100 Washington Square East New York, New York 10003 (501(c)3 Organization)	Cash	210,000	To fund educational fellowship
Fordham University 113 W 60th St 2nd floor New York, NY 10023 (501(c)3 Organization)	Cash	15,000	To fund educational fellowship
Princeton University 103 Clio Hall Princeton, NJ 08544 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
Friends of the University of Guelph, Inc 1814 Deerpath Rd Naperville, Il 60565 (501(c)3 Organization)	Cash	30,000	To fund educational fellowship
Aleph Alliance for Jewish Renewal 7000 Lincoln Drive, #B2 Philadelphia, Pa 19119 (501(c)3 Organization)	Cash	15,000	To fund educational fellowship
Yale University 320 York St, Room 129 New Haven, Ct 06520-8236 (501(c)3 Organization)	Cash	8,000	To fund educational fellowship
Columbia University 3022 Broadway New York, NY 10027 (501(c)3 Organization)	Cash	15,000	To fund educational fellowship
University of Michigan 515 East Jefferson Ann Arbor, MI 48109 (501(c)3 Organization)	Cash	15,000	To fund educational fellowship
Total Grants Paid		2,328 488	

**WEXNER HERITAGE PROGRAM**  
**SAMPLE TWO-YEAR CURRICULUM OVERVIEW**

**YEAR ONE**  
**THE HISTORY OF THE JEWISH PEOPLE**

**Objectives:**

- (1) To know the factual outline and major events of Jewish history.
- (2) To analyze our people's key leaders and their decisions.
- (3) To internalize our historical experience and form a coherent identity.
- (4) To consider the implications of Jewish historical events for contemporary Jewish leadership challenges.

**EIGHTEEN SESSIONS/THREE UNITS**

**Unit I. The Biblical and Rabbinic Periods**

- (1) Back to the Beginning: The Genesis of Leadership (Genesis)
- (2) The Challenge of Leadership (Exodus and Numbers)
- (3) The Conquest of the Land and the Ethics of Power (Deuteronomy, Joshua, Judges, I Samuel)
- (4) The Rise and Fall of the Monarchies (II Samuel, I & II Kings)
- (5) The Second Commonwealth (586 BCE - 70 CE)
- (6) Destruction and Renewal: The Emergence of Rabbinic Judaism (70 CE - 622 CE)
- (7) Leadership Session: Defining a Leadership Framework and Vocabulary

**Unit II. The Medieval Period**

- (8) The Jews under Medieval Christendom:  
From Constantine (4th Century) to Luther (16th Century)
- (9) Jews and Jewries in the Orbit of Islam
- (10) The Expulsion of Ashkenazic and Sephardic Jewries and their Aftermaths
- (11) Roads to Modernity: Social, Economic, Political and Intellectual (c. 1550-1789)
- (12) East European Jewry through 1881
- (13) Leadership Session—Leadership in Times of Transition:  
Adaptive Challenges in Jewish History

**Unit III. The Modern Period**

- (14) Enlightenment and Emancipation in Western Europe, 1750-1881
- (15) From Europe to America and Palestine, 1881-1914
- (16) Modern Anti-Semitism and the Holocaust, 1870-1945
- (17) Zionism, Palestine and Israel, 1914-1998
- (18) United States Jewry, 1914-1998

## YEAR TWO

### THE THOUGHT AND LITERATURE OF THE JEWISH PEOPLE

#### Objectives:

- (1) To acquaint students with the literature and fundamentals of Jewish thought from the Biblical period to the present.
- (2) To help students understand the relationship between thought and history.
- (3) To trace development and change in Jewish thought over the millennia.
- (4) To understand the nexus between the core ideas of Judaism's texts and the exercise of leadership in Jewish life.

#### EIGHTEEN SESSIONS/FOUR UNITS

##### Unit I. Biblical Text: Prophets and Writings

1. Moses, Elijah and Jonah: The Biblical Idea of Prophecy
2. Priest, Prophet, King: Biblical Models of Leadership
3. Divine Justice and God's Covenant: Job
4. Jewish Leadership in the Diaspora: The Book of Esther
5. The Book of Ruth: Autonomy and Vision as Programs for Leadership
6. Leadership Session: Case Studies and Peer Consultation

##### Unit II. Rabbinic Text

7. Mishnah
8. Talmud
9. Midrash
10. Codes and Responsa

##### Unit III. Liturgical Text

11. What is Prayer?
12. The Anatomy of the Prayer Book
13. Sabbath and Holiday Liturgy
14. The Haggadah

##### Unit IV. Modern Jewish Thought

15. The Rise of Modern Denominations in Judaism
16. Imagining Israel: Early Zionist Thinkers
17. 20<sup>th</sup> and 21<sup>st</sup> Century Jewish Thought

##### Concluding Leadership Session

18. Where does our Jewish Leadership Odyssey go from here?

Wexner Graduate Fellowship/Davidson Scholars Program  
Application (2014 - 2015)

Applicant Information

First name:

Last name:

Email Address:

Cell Phone:

Date of Birth:

Gender:

Address:

Age as of next August 1: 25

Have you previously applied to the Wexner Graduate Fellowship/Davidson Scholars or  
Wexner Field Fellows Program?

No

What city will you be living in next March?

**This field is required**

# WELCOME TO THE WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 1)

## General Information

Submit a short biographical sketch of yourself in the 3rd person (1250 character limit). (See "Meet our Fellows" on our web site for examples) \*

**required**

What city will you be living in next March? \*

**required**

---

List the specific graduate programs and academic institutions to which you are applying or are enrolled in (first year only) to prepare you for your professional career in the Jewish Community. \*

School	Program	Degree Granted	Enrollment Date	Expected Graduation Date
--------	---------	----------------	-----------------	--------------------------

---

If you are applying for other grants or scholarships for your graduate program, please list them below. (550 character limit)

**blank**

# WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 2)

## General Education

List all undergraduate programs that you have attended in chronological order with most recent first. If you did not graduate from a school, enter in all information necessary, and then leave the graduation date blank. \*

School	Location	Dates Attended	Major	Degree Granted	Date graduated, if applicable
blank	blank	blank	blank	blank	blank

List all graduate programs that you have attended in chronological order with most recent first. If you did not graduate from a school, enter in all information necessary, and then leave the graduation date blank.

School	Location	Dates Attended	Major	Degree Granted	Date Graduated, if applicable
blank	blank	blank	blank	blank	blank

List academic awards, honors, scholarships, and distinctions you have attained in your general education, as well as any publications you have authored.

Name of Award	Date	Brief Description (200 characters or less)
blank	blank	blank

Have you been suspended or dismissed from an academic institution? \*

required

If there has been a period of time since you have been a full-time student please describe your activities during that time. In other words, let us know what you have been doing since leaving school or have done in between your school programs. If you are currently an undergraduate, please write "N/A." (1000 character limit, including spaces) \*

required

In which foreign language(s) are you proficient? Please rate yourself in the following categories as excellent, good, fair or poor.

Language	Speaking	Reading Comprehension	Writing	Translation
blank	blank	blank	blank	blank

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 3)

Although this step is not required, please review and ensure you answered all questions relevant to you

### Jewish Education

Please list all elementary and secondary formal Jewish educational institutions that you attended starting with most recent.

School	Affiliation	Location	Type of Program	Dates Attended
blank	blank	blank	blank	blank

List up to five of your most significant informal Jewish educational activities (in your opinion), such as summer camps, youth groups, Israel trips or other programs in which you have participated starting with the most significant.

Organization	Location	Type of Program	Role	Dates of Participation
blank	blank	blank	blank	blank

List up to five university level courses in Jewish Studies. If you have taken more than five Jewish Studies classes, please list the ones that are most significant in your opinion. The committee will view the remaining courses on your transcripts.

School	Location	Course	Instructor	Credit Units
blank	blank	blank	blank	blank

Please list all formal Hebrew language study you have completed.

Program	Location	Dates
blank	blank	blank

List any academic awards, honors, scholarships and distinctions you have attained in your Jewish education as well as any related publications you have authored that you have NOT listed above.

Name of Award	Date	Brief Description (200 characters or less)
blank	blank	blank



# WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 4)

## Additional Educational Information

Name of undergraduate university or universities from which you graduated \*

School

GPA

blank

blank

If your school does not give a GPA, please explain here (leave blank if not applicable). You can also use this space to explain any anomalies in your GPA.

blank

Name of graduate programs from which you graduated (leave blank if not applicable)

School

GPA

blank

blank

If any of your graduate programs to which you are applying require the GRE you must enter your scores in the blanks below and have the official test score report sent to the Wexner Foundation.

If your school requires a different graduate school entrance test please have the official test score report sent to the Wexner Foundation at the address below and enter zeros in the blanks below.

If none of the graduate programs to which you are applying require one of these exams or you are applying as a Field Fellow, then please fill in this section with zeros as you do not need to submit test scores. \*

Name of Test

Verbal Score

Quantitative Score

Analytic Score

Exam Date

blank

blank

blank

blank

blank

## Unofficial Transcripts

Upload a scanned unofficial transcript of all undergraduate and graduate institutions that you attended. \*

## Official Transcripts

All official academic transcripts must be received by the due date and sent directly to:

Linda Smith

The Wexner Foundation

8000 Walton Parkway #110

New Albany, OH 43054

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 5)

Although this step is not required, please review and ensure you answered all questions relevant to you

### Employment History

Please list up to 5 of your most significant work experiences (including teaching, camp counseling, etc.) and indicate whether or not they were in the Jewish community. Please list chronologically starting with your most recent work experience.

Title	Organization	Jewish (Y/N)	Hours per week	Dates of Employment
blank	blank	blank	blank	blank

### Extra-curricular Activities

List and briefly describe up to 7 of your most significant volunteer, leadership and/or other activities on campus or in the larger community.

Role	Organization	Jewish (Y/N)	Hours per week	Dates
blank	blank	blank	blank	blank

List your hobbies and leisure-time interests.

Hobby
blank

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 6)

## Electronic Reference Process

Salutation	First Name	Last Name	Job Title	Phone	Email
blank	blank	blank	blank	blank	blank
blank	blank	blank	blank	blank	blank
blank	blank	blank	blank	blank	blank

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 7)

### Essay 1 - Content Guidelines

We are interested in understanding who you are, your career goals and how your projected graduate program or projected course of study will best prepare you for these goals. With this in mind, please describe in your essay the following:

- a. The development of your interest in your projected career, particularly the critical junctures that played an important role in this evolution (e.g. experiences, family influences, role models, ideas, etc.).
- b. The leadership skills that you need to acquire to best prepare yourself for your projected career.
- c. The reasons for selecting your specific graduate program(s) and how your program(s) will address the leadership skills development articulated above.

\* Required

Essay 1 \*

required

### Essay 2 - Content Guidelines

The Wexner Graduate Fellowship/Davidson Scholars Program is intended to facilitate the development of future professional leaders for the North American Jewish community. We are interested in your reflections on the North American Jewish community, focusing on its challenges and your sense of yourself as a future leader in that community. Please describe the following in your essay as fully as possible.

- a. As you consider the future of the North American Jewish community which issue most concerns you as it relates to your future career? Discuss your own approach to addressing this issue. How do you hope to bolster the efforts of addressing this issue?
- b. Describe the leadership role(s) you envision for yourself in the North American Jewish community ten to fifteen years from now.

\* Required

Essay 2 \*

required

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 8)

### Your Own Question/Answer

This space is designed to give you a chance to show us your creative side by writing your own question and answering it so that we can get a better sense of who you are. The committee encourages you to be creative in your question and answer and use this space to show us a side of you that may not normally be apparent in a written application.

Write your question here \*

**required**

Write your answer here \*

**required**

### Short Answer

Please share with us one thing you love about being Jewish in 60 seconds or less by video (guidelines below).

Note: it does not have to be the most profound, inspiring thing, or even your favorite but it should be something that is meaningful to you.

#### VIDEO GUIDELINES:

- The video should be a simple 60-second (or less) statement from you.
- Feel free to record yourself via your mobile device or laptop.
- WE PREFER IF YOU DON'T USE A PROFESSIONAL CAMERA and/or PROFESSIONAL EDITING SOFTWARE.
- Video must be in one of the following formats: .mov, .mp4, .mpeg, .avi.
- Please do not use animations, photographs, additional music/audio or graphics.
- This is not a video contest.
- We want to hear from you.

#### INSTRUCTIONS TO UPLOAD VIDEO:

- Capture a 60 second (or less) video via your mobile device or computer
- If using a mobile device, email the file to yourself
- Save the file somewhere on your computer that is accessible
- When filling out the Wexner Graduate or Field Fellowship Application, and you arrive to the questions to upload your video, click "Browse" and find the video file you have saved on your computer. When you see the green button, click upload
- Click "Next Step" and go onto the next question
- Please note, pending the video file size and the speed of your internet, uploading your video could take a little time.

Upload Video \*

### Statement for Re-applicants

Have you previously applied to be a Wexner Graduate Fellow/Davidson Scholar or Wexner Field Fellow? \*

**required**

### Submit Application

Submit your application to the Wexner Foundation by checking the box below and clicking "Submit Completed Application." By submitting my application, I am confirming that I am:

- Entering the first or second year of a full-time degree granting graduate program starting this summer or fall 2015, based in North America, that will allow me to pursue a career as a professional Jewish leader in North America.
- A citizen of the United States, Canada, or Mexico or have documentation that allows me to study and to work in that country.
- Between the ages of 21 and 40 upon entering my graduate program.

I understand that if selected as a "Finalist" that I will be available for an in-person interview the week of March 22, 2015 at the Foundation's expense.

**Also, I understand that if selected as a Wexner Fellow/Davidson Scholar that:**

- I will attend a 2-day orientation May 4-6, 2015 near Baltimore
- I will attend a 5-6 day Summer Institute in the second half of August for 4 years (the first one is August 16-21, 2015)
- I will attend a 4-day Winter Institute in January for 4 years (usually around MLK day)
- I will attend a 5-day retreat in November of my third year (usually around the JFNA GA)
- I will participate in monthly peer consultation conference phone calls
- Any change of my program must be approved by the Director of the Wexner Graduate Fellowship/Davidson Scholars Program
- I intend to work as a Jewish professional in North America for at least 4 years upon completion of my graduate degree.

☒ **I have read all of the statements above, reviewed my application, and confirmed that it is complete.**

---

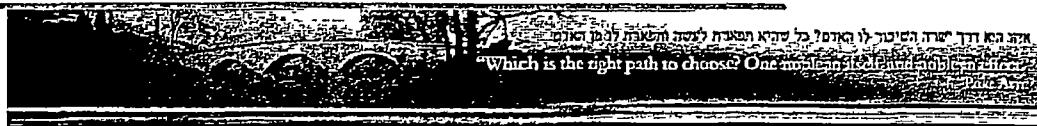
Please review and save/print your application before submitting. If you have trouble printing your application, it may be that your computer is blocking pop-ups. Try disabling your pop-up blocker.

All automated communication will come from the @wexner.net domain. Please be sure that your server will accept this email address and not send it to your spam or junk mail folder. Otherwise, be sure to check your spam or junk mail for automated emails from the Foundation.

Once your application is submitted, you will not be able to make changes or print your application.

☒ **I have saved my application.**

# THE WEXNER FOUNDATION



## WEXNER ISRAEL FELLOWSHIP PROGRAM ELIGIBILITY FORM

### The Wexner Israel Fellowship Program (WIFP) Eligibility Form for Academic Year 2014-2015 WIFP Class 26

Thank you for your interest in the Wexner Israel Fellowship Program. The following form will help us evaluate your eligibility for submitting candidacy for the WIFP program, which will take place during Harvard University's academic year 2014-2015.

It is recommended that you read the Wexner Foundation website thoroughly prior to filling in this form. [Harvard's Kennedy School \(HKS\)](#) website can also provide additional helpful and updated information to candidates.

Please note that you'll need a compatible browser to read this form and to fill it out ([Microsoft Internet Explorer](#) or [Mozilla Firefox](#)). This form is not compatible with other web browsers. Also, typed-in information cannot be saved once it has been entered, and prior to submitting the form.

Please supply the information below in English, except where Hebrew is specified, and in both cases as completely as you can.

Please make sure you keep a copy of these materials.

We will be in touch with you regarding your eligibility by return email or by phone. If you have any questions, please contact Ms. Nizan Glad at [wifp@wexner.net](mailto:wifp@wexner.net) or 02-563-7035.

\*\*\*\*\*

\* Indicates required field

#### General Information

\*Family Name

\*First Name

Prior Full Name

\*Gender

☐ Male ☒ Female

\*Date of Birth

(DD/MM/YYYY)

(Please note that in order to be eligible, candidate must be at least 30 years and not more than 49 years of age on November 25, 2013.)

#### Present Mailing Address

\*Address I Street

Address I POB

\*Address I City/Town

\*Address I Region

\*Address I Postal Code

\*Address I Country

Address II Street

Address II POB

Address II City/Town

Address II Region

Address II Postal Code

Address II Country

\*Home Phone

Work Phone

\*Cell Phone

\*Email Address I

\*Please retype your

Email Address I

Email Address II

Please retype your

Email Address II

#### \*Work Experience

Please briefly characterize your professional work experience and the skills that you believe represent your strong points. What are the two or three professional skills that you need to improve upon?

Add your CV below the the characterization you have just provided.

Please limit your entire response to 4,500 characters, including spaces (approximately 2 pages, double-spaced, 12 point font and 3/4" margins).

Our system allows for minimal formatting of text. It is recommended that you write the text of your response, including your CV, with a program that provides a "spell check" function and a character counter, and then cut and paste it into the space below. Also, once you have done this, be sure to scroll down to see that all text was pasted into the box below, and double check the information on your final print-out before submitting.

**\*Current position (English)**

Please indicate the organization in which you are currently employed, including title of position, in English. Please be sure to select at least one of the options below.

If you currently work for more than one organization, please indicate all relevant information.

<b>Government Ministries</b>	<input type="text"/>
Position	<input type="text"/>
<b>Government Authorities</b>	<input type="text"/>
Position	<input type="text"/>
<b>Government Companies</b>	<input type="text"/>
Position	<input type="text"/>
<b>Local Government</b>	<input type="text"/>
Organization	<input type="text"/>
Position	<input type="text"/>
<b>IDF</b>	<input type="text"/>
Position	<input type="text"/>
<b>Hospitals</b>	<input type="text"/>
Position	<input type="text"/>
<b>HMO (Kupot Holim)</b>	<input type="text"/>
Position	<input type="text"/>
<b>NGO (name of organization)</b>	<input type="text"/>
Position	<input type="text"/>
<b>Other (name of organization)</b>	<input type="text"/>
Position	<input type="text"/>

**\*Current position (Hebrew)**

Please indicate the organization in which you are currently employed, including title of position, in Hebrew. Please be sure to select at least one of the options below.



משרדי ממשלה	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
רשויות ממשלתיות	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
חברות ממשלתיות	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
שלטון מקומי	<input type="checkbox"/>
ארגון	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
צה"ל	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
בתי חולים	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
קופות חולים	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
מגזר שלישי-שם הארגון	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>
אחר - שם הארגון	<input type="checkbox"/>
תפקיד	<input type="checkbox"/>

#### Immediate Supervisor

\*Immediate supervisor's name in English.

\*Immediate supervisor's position in English.

\*Immediate supervisor's name in Hebrew.

\*Immediate supervisor's position in Hebrew.

#### \*Prior Work Experience

Please specify your five prior work professional positions (before your present position as indicated above). Please note that after pressing the bar below, you will be returned to the top of the page and will need to scroll down.

From (YYYY) / Until (YYYY) / Position / Workplace

[Click here to add a Prior Work Experience](#)

#### Additional Information

We are interested in receiving as full a picture as possible of your professional expertise and leadership potential in the Israeli public sector. Use the free text box below if additional space is necessary to explain your chosen career path so far.

Please note that there is a limit of 2,000 characters, including spaces, for this section.

#### \*Professional Development

It is important for us to have a sense of your professional vision as a Wexner Israel Fellowship Candidate. Please indicate up to three of your professional goals for the next five to ten years.

Please note that there is a limit of 1,000 characters, including spaces, for this section.

Military Service/National-Civic Service

If relevant - please specify:

Position (Rank)   
 From (YYY)   
 Until (YYY)   
 Type   
 Corps

#### Previously Applied

\*Have you ever applied to the Wexner Israel Fellowship Program before?

☐

If so, when (MMYYYY)?

#### \*Standardized Test Score (TOEFL/ IELTS or GRE)

Indicate intended or actual date of TOEFL/ IELTS (Test of English as a Foreign Language) or GRE (Graduate Record Examinations), which is required for admission to HKS. Note that it is crucial to register at the earliest opportunity for the exam.

Please keep in mind that TOEFL/ IELTS or GRE test scores and any score appeals must be submitted by November 25, 2013. If you do not have a scheduled exam date, please indicate the month you intend to take the exam.

Most candidates of the Wexner Israel Fellowship Program are exempted by HKS from the GRE or GMAT as stated on the School's website. The TOEFL/ IELTS is required by HKS of all candidates whose native language is not English or whose undergraduate degree program was not conducted in English.

If you're not sure whether or not you should take the TOEFL/ IELTS or GRE test, please contact the HKS admission's office directly by email with your question, and add the WIFP email address in the CC section.

Please note that after pressing the bar below, you will be returned to the top of the page and will need to scroll down.

Test Type / Date Type / Exam Score / Exam Date

[Click here to add a test information](#)

#### How did you hear about the Wexner Israel Fellowship Program?

Please mark one or more of the following options:

☐ Newspaper ☐ Internet ☐ Foundation Website ☐ WIFP Alumni ☐ Civil Service Commission ☐ Other

If newspaper or other, please provide details:

Newspaper

Other

#### User Name and Password

Please choose a username and password. These will be your user name and password designations throughout the Wexner Israel Fellowship application process.

\*User Name

\*Password (minimum 7 characters)

\*Confirm Password

\*Once you have submitted your form, you will not be able to view it and/or change data in it. We strongly recommend that you save a copy of the form for your records. To save your Eligibility Form (EF) in PDF format, please click the "Save EF as PDF" button.

☐ I have printed my eligibility form.

[Save EF as PDF](#)

[Submit Eligibility Form](#)

HEADQUARTERS COLUMBUS  
8000 Wallon Parkway, Suite 110  
New Albany, Ohio 43054  
(614) 539-6060

NEW YORK  
599 Lexington Avenue, 27A  
New York, New York 10022  
(212) 355-6115

CAMBRIDGE  
Center for Public Leadership: Harvard Kennedy School  
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