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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
Do not enter social security numbers on this form as it may be made public  
Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014, and ending 12-31-2014

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

Jewish Federation Council of Greater LA

% IVAN WOLKIND

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

6505 WILSHIRE BLVD

City or town, state or province, country, and ZIP or foreign postal code

LOS ANGELES, CA 90048

F Name and address of principal officer

JAY SANDERSON  
6505 WILSHIRE BLVD  
LOS ANGELES, CA 90048

H(a) Is this a group return for subordinates?

☐ Yes☒ No

H(b) Are all subordinates included?

☐ Yes☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3)☐ 501(c) ( ) (insert no )☐ 4947(a)(1) or ☐ 527

J Website:

WWW JEWISHLA ORG

K Form of organization

☒ Corporation☐ Trust☐ Association☐ Other

L Year of formation

1937

M State of legal domicile

CA

Part I	Summary																																
Activities & Governance	<div>1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE O</div>																																
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets																																
	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>55</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>55</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2014 (Part V, line 2a)</td><td>224</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>2,250</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>5,324</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>2,839</td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	55	4	Number of independent voting members of the governing body (Part VI, line 1b)	55	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	224	6	Total number of volunteers (estimate if necessary)	2,250	7a	Total unrelated business revenue from Part VIII, column (C), line 12	5,324	7b	Net unrelated business taxable income from Form 990-T, line 34	2,839														
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Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge

Sign Here

\*\*\*\*\*

Signature of officer

2015-11-09

Date

IVAN WOLKIND COO/CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

KARA ADAMS

Preparer's signature

KARA ADAMS

Date

Check ☐ if self-employed

PTIN P00023315

Firm's name

ERNST & YOUNG US LLP

Firm's EIN

Phone no

(949) 794-2300

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

☐ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)

Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization's mission

SEE SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code ) (Expenses \$ 23,151,230 including grants of \$ 13,549,345 ) (Revenue \$ 1,988,322 )

SEE SCHEDULE O

4b

(Code ) (Expenses \$ 15,482,224 including grants of \$ 12,112,636 ) (Revenue \$ 0 )

SEE SCHEDULE O

4c

(Code ) (Expenses \$ 2,112,414 including grants of \$ 370,482 ) (Revenue \$ 0 )

SEE SCHEDULE O

4d














Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses 40,745,868

Part IV Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	103	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	224	
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		2b	Yes
3a. Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes
b. If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O.</i>		3b	Yes
4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	No
b. If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	No
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	No
b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7. Organizations that may receive deductible contributions under section 170(c).			
a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes
b. If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d. If "Yes," indicate the number of Forms 8282 filed during the year.		7d	
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	Yes
8. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8	
9a. Did the sponsoring organization make any taxable distributions under section 4966?		9a	
b. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	
10. Section 501(c)(7) organizations. Enter			
a. Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11. Section 501(c)(12) organizations. Enter			
a. Gross income from members or shareholders.		11a	
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		11b	
12a. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b	
13. Section 501(c)(29) qualified nonprofit health insurance issuers.			
a. Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		13a	
b. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		13b	
c. Enter the amount of reserves on hand.		13c	
14a. Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b. If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O.</i>		14b	

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . .		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent . . . . .		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		No
6	Did the organization have members or stockholders? . . . . .	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body? . . . . .	Yes	
8b	Each committee with authority to act on behalf of the governing body? . . . . .	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . . . .		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	Yes	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	Yes	
13	Did the organization have a written whistleblower policy? . . . . .	Yes	
14	Did the organization have a written document retention and destruction policy? . . . . .	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official . . . . .	Yes	
15b	Other officers or key employees of the organization . . . . .	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records IVAN WOLKIND 6505 WILSHIRE BLVD LOS ANGELES, CA 90048 (323) 761-8000	

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

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

Form **990** (2014)



## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

<b>1b</b>	<b>Sub-Total . . . . .</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	2,231,233	0	464,676

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶30

		Yes	No
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b>	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	Yes
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WORLD EXPRESS TRAVEL, 18425 BURBANK BLVD SUITE 512 TARZANA, CA 91356	TRAVEL SERVICES	971,342
NASTEC INTERNATIONAL, 5000 N PARKWAY CALABASAS, CA 91302	SECURITY SERVICES	817,507
MITSUBISHI ELECTRIC ELECTRONICS U, 25480 NETWORK PLACE CHICAGO, IL 60673	MAINTENANCE SVCS	390,266
BLACKBAUD, 2000 DANIEL ISLAND DRIVE CHARLESTON, SC 29492	SOFTWARE SERVICES	251,297
HAROLD GRINSPOON FOUNDATION, 67 HUNT STREET SUITE 100 AGAWAM, MA 01001	BOOK DISTRIB SVCS	236,086

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶16

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . . 1a				
	b	Membership dues . . . . . 1b	102,909			
	c	Fundraising events . . . . . 1c	10,651,580			
	d	Related organizations . . . . . 1d	5,637,376			
	e	Government grants (contributions) 1e	373,276			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	30,516,364			
	g	Noncash contributions included in lines 1a-1f \$	2,957,517			
	h	Total. Add lines 1a-1f . . . . .	47,281,505			
Program Service Revenue	2a	PROGRAM SERVICES	Business Code 900099	94,646	94,646	0
	b	RENT REIMBURSEMENT	531120	1,912,347	1,912,347	0
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f . . . . .	2,006,993			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	2,150,936		5,324	2,145,612
	4	Income from investment of tax-exempt bond proceeds . . . . .	0			
	5	Royalties . . . . .	0			
	6a	Gross rents	(i) Real (ii) Personal			
	b	Less rental expenses				
	c	Rental income or (loss)	0 0			
	d	Net rental income or (loss) . . . . .	0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
	b	Less cost or other basis and sales expenses	9,305,837			
	c	Gain or (loss)	8,541,608			
	d	Net gain or (loss) . . . . .	764,229			
	8a	Gross income from fundraising events (not including \$ 10,651,580 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a 751,915			
	b	Less direct expenses . . . . . b	1,004,551			
	c	Net income or (loss) from fundraising events . . . . .	-252,636			-252,636
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a			
	b	Less direct expenses . . . . . b				
	c	Net income or (loss) from gaming activities . . . . .	0			
	10a	Gross sales of inventory, less returns and allowances . . . . .	a			
	b	Less cost of goods sold . . . . . b				
	c	Net income or (loss) from sales of inventory . . . . .	0			
		Miscellaneous Revenue	Business Code			
	11a	REIMBURSEMENTS	900099	47,602	0	0
	b					
	c					
	d	All other revenue . . . . .				
	e	Total. Add lines 11a-11d . . . . .	47,602			
	12	Total revenue. See Instructions . . . . .	51,998,629	2,006,993	5,324	2,704,807

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . . .	25,830,463	25,830,463		
2	Grants and other assistance to domestic individuals See Part IV, line 22 . . . . .	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 . . . . .	202,000	202,000		
4	Benefits paid to or for members . . . . .	0	0		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	1,530,620	758,508	217,653	554,459
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0	0	0	0
7	Other salaries and wages . . . . .	11,918,210	6,518,290	780,511	4,619,409
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	1,558,802	713,938	160,580	684,284
9	Other employee benefits . . . . .	895,393	431,483	83,425	380,485
10	Payroll taxes . . . . .	1,067,545	597,172	74,985	395,388
11	Fees for services (non-employees)				
a	Management . . . . .	0	0		0
b	Legal . . . . .	30,601	0	30,601	0
c	Accounting . . . . .	152,497		152,497	0
d	Lobbying . . . . .	63,000	63,000	0	
e	Professional fundraising services See Part IV, line 17	29,185			29,185
f	Investment management fees . . . . .	134,608	0	134,608	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	781,622	615,452	124,399	41,771
12	Advertising and promotion . . . . .	884,643	521,351	1,806	361,486
13	Office expenses . . . . .	458,204	160,623	111,485	186,096
14	Information technology . . . . .	339,794	90,613	132,868	116,313
15	Royalties . . . . .	0	0	0	0
16	Occupancy . . . . .	2,169,965	1,517,284	502,834	149,847
17	Travel . . . . .	897,717	736,162	79,794	81,761
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0	0	0	0
19	Conferences, conventions, and meetings . . . . .	166,468	103,464	33,678	29,326
20	Interest . . . . .	34,962	0	34,962	0
21	Payments to affiliates . . . . .	0	0	0	0
22	Depreciation, depletion, and amortization . . . . .	1,625,805	1,072,059	441,268	112,478
23	Insurance . . . . .	475,892	95,178	199,875	180,839
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	SPECIAL EVENT EXPENSE	1,033,668	114,232	0	919,436
b	EQUIPMENT REPAIRS/MAINT	702,758	372,740	214,443	115,575
c	TEMPORARY LABOR	342,379	59,946	193,016	89,417
d	ALL OTHER EXPENSES	623,536	171,910	309,076	142,550
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	53,950,337	40,745,868	4,014,364	9,190,105
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		25,099,490	1	19,554,942
	2	Savings and temporary cash investments		6,543,655	2	4,734,040
	3	Pledges and grants receivable, net		11,134,374	3	11,568,128
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		0	6	0
	7	Notes and loans receivable, net		9,400,155	7	7,558,432
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		444,286	9	499,650
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a37,136,279	17,681,637	10c	16,835,359
	b	Less: accumulated depreciation	10b20,300,920			
	11	Investments—publicly traded securities		30,871,267	11	30,342,211
	12	Investments—other securities. See Part IV, line 11.		45,840,271	12	48,486,797
	13	Investments—program-related. See Part IV, line 11.		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11.		6,774,979	15	10,674,570
	16	Total assets. Add lines 1 through 15 (must equal line 34).		153,790,114	16	150,254,129
Liabilities	17	Accounts payable and accrued expenses		5,298,580	17	4,059,345
	18	Grants payable		14,150,343	18	14,196,225
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		0	21	9,540,498
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		3,300,000	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		8,025,831	25	1,749,042
	26	Total liabilities. Add lines 17 through 25.		30,774,754	26	29,545,110
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		101,396,833	27	98,762,577
	28	Temporarily restricted net assets		16,805,185	28	17,133,100
	29	Permanently restricted net assets		4,813,342	29	4,813,342
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		123,015,360	33	120,709,019
	34	Total liabilities and net assets/fund balances		153,790,114	34	150,254,129

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,998,629
2	Total expenses (must equal Part IX, column (A), line 25)	2	53,950,337
3	Revenue less expenses Subtract line 2 from line 1	3	-1,951,708
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	123,015,360
5	Net unrealized gains (losses) on investments	5	-354,633
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	120,709,019

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 95-1643388

Name: Jewish Federation Council of Greater LA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LESLIE BIDER ..... DIRECTOR/CHAIRMAN	1 0 ..... 0 0	X		X				0	0	0
(1) SHARON JANKS ..... DIRECTOR/VICE CHAIRMAN	1 0 ..... 0 0	X		X				0	0	0
(2) ALBERT PRAW ..... DIRECTOR/VICE CHAIRMAN	1 0 ..... 0 0	X		X				0	0	0
(3) ALAN ROSEN ..... DIRECTOR/VICE CHAIRMAN	1 0 ..... 0 0	X		X				0	0	0
(4) TERRI SMOOKE ..... DIRECTOR/TREASURER	1 0 ..... 0 0	X		X				0	0	0
(5) NANCY GLASER ..... DIRECTOR/SECRETARY	1 0 ..... 0 0	X		X				0	0	0
(6) DANIEL GRYZMAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(7) ORNA WOLENS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(8) LYNNETTE BROWN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(9) DEREK BROWN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(10) JULIE PLATT ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(11) LEON JANKS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(12) ROCHELLE COHEN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(13) IRVING WEINTRAUB ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(14) HEIDI MONKARSH ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(15) KARMI MONSHER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(16) PAUL PEPPERMAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(17) JONATHAN ANSHELL ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(18) SUE MELTZER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(19) KENNETH PRESSBERG ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(20) RODNEY FREEMAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(21) ANDREW ALTSHULE ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(22) DEBBIE ATTANASIO ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(23) HOWARD BERNSTEIN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(24) LYNN BIDER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) JERRY COBEN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(1) JONATHAN COOKLER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(2) RABBI ELLIOT DORFF ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(3) JOSHUA FEFFER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(4) CECE FEILER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(5) RABBI ED FEINSTEIN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(6) LARRY FREEMAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(7) JESSE GABRIEL ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(8) ABNER GOLDSTINE ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(9) DEBI GRABOFF ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(10) ADA HORWICH ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(11) NANCY JOSEPHSON ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(12) MARK LAINER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(13) JONATHAN LITTMAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(14) FRANK MAAS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(15) VIRGINIA MAAS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(16) HAROLD MASOR ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(17) SHARON NAZARIAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(18) STEVEN NICHOLS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(19) LARRY POST ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(20) MARC ROHATINER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(21) LENNY SANDS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(22) DANA SAYLES ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(23) JESSE SHARF ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(24) BRIAN SHIRKEN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(51) GLENN SONNENBERG ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(1) MARK WEINSTEIN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(2) BRIAN WEISBERG ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(3) RABBI DAVID WOLPE ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(4) MICHAEL ZIERING ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
(5) JAY SANDERSON ..... CEO / PRESIDENT	38 0 ..... 0 0			X				496,975	0	53,337
(6) IVAN WOLKIND ..... CFO/COO	38 0 ..... 0 0			X				291,380	0	28,912
(7) NANCY SACKS ..... EVP DEVELOPMENT OFFICER	38 0 ..... 0 0				X			344,195	0	30,037
(8) ANDREW CUSHNIR ..... EVP CHIEF PROGRAM/DEVELOPMENT	38 0 ..... 0 0				X			222,734	0	63,050
(9) CAROL KORANSKY ..... EVP DIRECTOR VALLEY ALLIANCE	38 0 ..... 0 0					X		216,560	0	63,397
(10) CYNTHIA AYALA ..... SVP ADMINISTRATION & HR	38 0 ..... 0 0					X		182,078	0	53,699
(11) DENISE OSSO ..... SVP CREATIVE DIRECTOR	38 0 ..... 0 0					X		151,013	0	67,342
(12) JOHN MAGOULAS ..... ASSOC CHIEF DEV OFFICER	38 0 ..... 0 0					X		167,791	0	58,554
(13) MITCHELL HAMERMAN ..... SVP CAMPAIGN MGMT & COMM	38 0 ..... 0 0					X		158,507	0	46,348



SCHEDULE A  
(Form 990 or 990EZ)

Department of the  
Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization Jewish Federation Council of Greater LA	Employer identification number 95-1643388
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations . . . . . \_\_\_\_\_
- g

Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	49,553,438	45,503,542	44,804,424	44,654,777	47,281,505	231,797,686
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	49,553,438	45,503,542	44,804,424	44,654,777	47,281,505	231,797,686
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,930,578
6 Public support. Subtract line 5 from line 4						224,867,108

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	49,553,438	45,503,542	44,804,424	44,654,777	47,281,505	231,797,686
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	827,410	1,057,288	1,755,379	1,878,837	2,150,936	7,669,850
9 Net income from unrelated business activities, whether or not the business is regularly carried on			613,490			613,490
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11 Total support. Add lines 7 through 10						240,081,026
12 Gross receipts from related activities, etc. (see instructions)					12	14,082,732
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . .						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	93 663 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	93 649 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	0 %	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> <b>Answer (a) and (b) below.</b>			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 <u>Parent of Supported Organizations</u> <b>Answer (a) and (b) below.</b>			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. . . . .			
b From 2010. . . . .			
c From 2011. . . . .			
d From 2012. . . . .			
e From 2013. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. . . . .			
b From 2011. . . . .			
c From 2012. . . . .			
d From 2013. . . . .			
e From 2014. . . . .			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

**Facts And Circumstances Test**

Return Reference

Explanation



SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

***www.irs.gov/form990.***

OMB No 1545-0047

2014

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Jewish Federation Council of Greater LA	Employer identification number 95-1643388
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____
4	Did the filing organization file <b>Form 1120-POL</b> for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	0
d	Mailings to members, legislators, or the public?		No	0
e	Publications, or published or broadcast statements?		No	0
f	Grants to other organizations for lobbying purposes?	Yes		63,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	0
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	0
i	Other activities?		No	0
j	Total. Add lines 1c through 1i.			63,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No	

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
SCHEDULE C, PART II-B, LINE 1F	LOBBYING EXPENSE ALLOCATIONS THE JEWISH PUBLIC AFFAIRS COMMITTEE OF CALIFORNIA (JPAC) IS THE LARGEST SINGLE STATE COALITION OF JEWISH ORGANIZATIONS IN THE NATION. JPAC IS COMPRISED OF JEWISH FEDERATIONS, JEWISH COMMUNITY RELATIONS COMMITTEES, AND OTHER CALIFORNIA BASED JEWISH ORGANIZATIONS. JPAC TAKES POSITIONS ON LEGISLATION DEALING WITH ISSUES IMPORTANT TO THE JEWISH COMMUNITY, SUCH AS CIVIL RIGHTS, SEPARATION OF CHURCH AND STATE, SOCIAL SERVICE DELIVERY, AND PUBLIC EDUCATION. JPAC ALSO ADVOCATES ON THE FULL RANGE OF JEWISH COMMUNITY CONCERNS, INCLUDING SUPPORT ON BEHALF OF JEWISH SOCIAL SERVICE PROVIDER AGENCIES THAT SERVE THE POPULATION AT LARGE. JPAC SERVES AS A SOURCE TO LEGISLATORS ON VARIOUS POLICY MATTERS. LOBBYING ALLOCATION TO JPAC IS \$63,000.

[illegible]

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
► Attach to Form 990.  
Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization Jewish Federation Council of Greater LA	Employer identification number 95-1643388
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

► \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b Assets included in Form 990, Part X

► \$ \_\_\_\_\_

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . .

☒

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance . . . . .	81,580,221	74,134,717	67,264,208	72,141,000	73,183,050
b Contributions . . . . .	3,707,776	2,089,662	1,055,573	1,559,930	2,704,612
c Net investment earnings, gains, and losses	2,335,782	9,346,757	9,330,396	-626,730	7,629,912
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .	4,101,572	3,764,817	3,319,758	5,662,869	11,260,328
f Administrative expenses . . . . .	255,587	226,098	195,702	147,123	116,246
g End of year balance . . . . .	83,266,620	81,580,221	74,134,717	67,264,208	72,141,000

- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶ 89 200 %

b

Permanent endowment ▶ 5 800 %

c

Temporarily restricted endowment ▶ 5 000 %

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations . . . . .	3a(i) Yes	
(ii) related organizations . . . . .	3a(ii) Yes	
- b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

3b

Yes
- 4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .		2,463,991		2,463,991
b Buildings . . . . .		28,186,670	15,260,111	12,926,559
c Leasehold improvements . . . . .				0
d Equipment . . . . .		3,666,771	3,397,420	269,351
e Other . . . . .		2,818,847	1,643,389	1,175,458
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .				16,835,359



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	49,827,210
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-354,633
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-354,633
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	50,181,843
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	134,608
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	1,682,178
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	1,816,786
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	51,998,629

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	52,133,551
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	52,133,551
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	134,608
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	1,682,178
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	1,816,786
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	53,950,337

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
SCHEDULE D, PART IV, LINE 2B	THE JEWISH FEDERATION COUNCIL OF GREATER LA PARTNERED WITH THE JEWISH COMMUNITY FOUNDATION ("FOUNDATION"), BUREAU OF JEWISH EDUCATION ("BJE"), AND FIVE BJE AFFILIATED JEWISH HIGH SCHOOLS ("HIGH SCHOOLS") PARTICIPATED IN THE JIM JOSEPH FOUNDATION HIGH SCHOOL AFFORDABILITY INITIATIVE THE INITIATIVE ASSISTS THE HIGH SCHOOLS IN RAISING ENDOWMENT DOLLARS WHICH WILL BUILD ONGOING CAPACITY TO SUPPORT JEWISH HIGH SCHOOL EDUCATION THE FEDERATION ACTS AS INTERMEDIARY BETWEEN THE BJE AND THE FOUNDATION BY TRANSFERRING FUNDS RECEIVED BY BJE FROM THE HIGH SCHOOLS FOR INVESTING IN THE COMMON INVESTMENT POOL MANAGED BY THE FOUNDATION
SCHEDULE D, PART V, LINE 4	INTENDED USES OF ENDOWMENT THE BOARD DESIGNATED ENDOWMENT IS INTENDED TO PROVIDE ONGOING SUPPORT FOR THE ORGANIZATION THROUGH AN ANNUAL DISTRIBUTION THE ANNUAL DISTRIBUTION IS BASED ON A SPENDING RATE OF 5% CALCULATED BASED ON THE TWELVE QUARTERS AVERAGE BALANCE AT SEPTEMBER 30TH ADDITIONALLY, THE BOARD DESIGNATED ENDOWMENT MAY BE USED TO SUPPORT SIGNIFICANT OPERATING OR PROGRAM INITIATIVES THAT EXCEED THE PROJECTED ANNUAL REVENUE AND EXPENSE BUDGET DISTRIBUTIONS THAT EXCEED THE ANNUAL SPENDING RATE ARE APPROVED BY THE BOARD OTHER ENDOWMENT FUNDS ARE INTENDED TO A) PROVIDE AN ENDOWMENT TO MATCH AREA JEWISH DAY SCHOOLS SCHOLARSHIP DISTRIBUTIONS, AND B) PROVIDE FUNDS FOR CAPITAL IMPROVEMENTS TO THE FEDERATION'S FACILITIES
SCHEDULE D, PART X, LINE 2	FIN 48(ASC740) FOOTNOTE THE FEDERATION IS EXEMPT FROM FEDERAL INCOME AND CALIFORNIA FRANCHISE TAXES UNDER SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE AND CORRESPONDING CALIFORNIA REVENUE AND TAXATION CODE SECTIONS, RESPECTIVELY ADDITIONALLY, THE FEDERATION HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE REPORTING OR DISCLOSURE IN THE FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2014
SCHEDULE D, PART XI, LINE 4B	EXPLANATION OF OTHER ADJUSTMENTS THE \$1,682,178 IS COMPRISED OF A RECLASS OF RENTAL REVENUE FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$1,912,347, A RECLASS OF CARS EXPENSES FROM REVENUE REPORTED IN THE AUDITED FINANCIAL STATEMENT TO EXPENSE REPORTED ON THE 990 OF \$9,416, A RECLASS OF FUNDRAISING NET INCOME FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$(252,636), AND A PRIOR PERIOD ADJUSTMENT OF \$13,051
SCHEDULE D, PART XII, LINE 4B	EXPLANATION OF OTHER ADJUSTMENTS THE \$1,682,178 IS COMPRISED OF A RECLASS OF RENTAL REVENUE FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$1,912,347, A RECLASS OF CARS EXPENSES FROM REVENUE REPORTED IN THE AUDITED FINANCIAL STATEMENT TO EXPENSE REPORTED ON THE 990 OF \$9,416, A RECLASS OF FUNDRAISING NET INCOME FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$(252,636), AND A PRIOR PERIOD ADJUSTMENT OF \$13,051



[illegible]

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
► Attach to Form 990.  
► Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
Jewish Federation Council of Greater LA

Employer identification number  
95-1643388

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1) Middle East and North Africa	1	22	Program services	SEE PART V	1,483,380
( 2) Middle East and North Africa			Grantmaking		202,000
( 3)					
( 4)					
( 5)					
3a Sub-total	1	22			1,685,380
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1	22			1,685,380

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( 1 )	See Add'l Data								
( 2 )									
( 3 )									
( 4 )									
( 5 )									
( 6 )									
( 7 )									
( 8 )									
( 9 )									
( 10 )									
( 11 )									
( 12 )									
( 13 )									
( 14 )									
( 15 )									
( 16 )									

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

6

3

Enter total number of other organizations or entities . . . . . ▶

0

Part III

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
( 1 )							
( 2 )							
( 3 )							
( 4 )							
( 5 )							
( 6 )							
( 7 )							
( 8 )							
( 9 )							
( 10 )							
( 11 )							
( 12 )							
( 13 )							
( 14 )							
( 15 )							
( 16 )							
( 17 )							
( 18 )							

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)*

☐ Yes

☒ No

Part V

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2 AND PART I, LINE 3, COLUMN E	ORGANIZATION'S PROGRAM SERVICE ACTIVITY THE JEWISH FEDERATION OF LOS ANGELES' ISRAEL OFFICE OVERSEES THE JEWISH FEDERATION'S POLICIES, PROGRAMS, ALLOCATIONS, AND INSTITUTIONAL RELATIONSHIPS IN ISRAEL. SUPPORT FOR, AND THE RELATIONSHIPS WITH, THE PEOPLE OF ISRAEL ARE KEY ASPECTS OF THE FEDERATION'S MISSION. THE ISRAEL OFFICE PROVIDES COORDINATION FOR OVERSEAS VISITS TO ISRAEL BY MISSIONS, INDIVIDUALS, FAMILIES, ELECTED OFFICIALS, INTER-ETHNIC AND INTER-RELIGIOUS LEADERS AND EDUCATORS. THE ISRAEL OFFICE REPRESENTS THE FEDERATION WITH THE JEWISH AGENCY FOR ISRAEL, THE JOINT DISTRIBUTION COMMITTEE, THE JEWISH FEDERATION OF NORTH AMERICA, UNITED ISRAEL APPEAL, ISRAEL OFFICES OF OTHER JEWISH FEDERATIONS, ISRAELI GOVERNMENT MINISTRIES, THE UNITED STATES EMBASSY, MUNICIPALITIES IN ISRAEL, ACADEMIC INSTITUTIONS, AND ISRAELI NON-GOVERNMENTAL ORGANIZATIONS. EXPENDITURES FOR THE OFFICE IN ISRAEL AMOUNT TO \$269,329. EXPENDITURES RELATED TO OUR COMMUNITY MISSIONS TO ISRAEL AND ALL RELATED COSTS ARE ALSO ON THIS LINE AND AMOUNT TO \$1,214,051.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3, COLUMN F	THE AMOUNT OF EXPENDITURES WAS DETERMINED USING THE ACCRUAL METHOD OF ACCOUNTING

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART II	IN ADDITION TO THE GRANTS REPORTED ON SCHEDULE F, PART II, THE JEWISH FEDERATION COUNCIL O F GREATER LOS ANGELES MAKES GRANTS TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHIC H IS A 501 (C) (3) DOMESTIC U S CHARITY A PORTION OF THE GRANTS TO JFNA IS INTENDED FOR FOREIGN BENEFICIARIES JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A S UBSIDIARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501 ( C) (3) ORGANIZATIONS - EACH FILE A SEPARATE FORM 990 AND REPORT THE DETAIL OF THE GRANTS P ROVIDED TO FOREIGN BENEFICIARIES ON SCHEDULE F THE JFNA GRANT IS REPORTED ON SCHEDULE I, PART II



Additional Data

Software ID:  
Software Version:  
EIN: 95-1643388  
Name: Jewish Federation Council of Greater LA

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	General Support	40,000	CHECK			
		Middle East and North Africa	General Support	50,000	CHECK			
		Middle East and North Africa	General Support	40,000	CHECK			
		Middle East and North Africa	General Support	20,500	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	General Support	45,000	CHECK			
		Middle East and North Africa	General Support	6,500	CHECK			

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the  
organization entered more than \$15,000 on Form 990-EZ, line 6a.  
Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public  
Inspection

Name of the organization Jewish Federation Council of Greater LA	Employer identification number 95-1643388
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Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a <input checked="" type="checkbox"/> Mail solicitations	e <input checked="" type="checkbox"/> Solicitation of non-government grants
b <input checked="" type="checkbox"/> Internet and email solicitations	f <input checked="" type="checkbox"/> Solicitation of government grants
c <input checked="" type="checkbox"/> Phone solicitations	g <input checked="" type="checkbox"/> Special fundraising events
d <input checked="" type="checkbox"/> In-person solicitations	
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 SIEGEL MARKETING GROUP INC 1845 N FARWELL SUITE 300  MILWAUKEE, MI 53202	TELE FUNDRAISING		No	206,561	29,185	177,376
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total . . . . .				206,561	29,185	177,376

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

CA

.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		REC DINNER (event type)	LEGAL D DINNER (event type)	10 (total number)	(add col (a) through col (c))
Revenue	1	Gross receipts . . . .	2,174,439	535,478	8,693,578
	2	Less Contributions . . . .	1,846,884	448,303	8,356,393
	3	Gross income (line 1 minus line 2) . . . .	327,555	87,175	337,185
Direct Expenses	4	Cash prizes . . . .			
	5	Noncash prizes . . . .			
	6	Rent/facility costs . . . .		4,776	4,776
	7	Food and beverages . . . .	348,306	124,354	257,617
	8	Entertainment . . . .		5,313	5,313
	9	Other direct expenses . . . .	22,635	16,328	225,222
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶			
	11	Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶			

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
Direct Expenses	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . .			
	6	Volunteer labor . . . . .	Yes % No	Yes % No	Yes % No
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶			

9 Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activities conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization and the amount of gaming revenue retained by the third party

\$ and the \$

c

If "Yes," enter name and address of the third party

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year

\$

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
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Schedule G (Form 990 or 990-EZ) 2014

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Jewish Federation Council of Greater LA

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

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public  
Inspection

Employer identification number

95-1643388

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

127

3

Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS THE RESPONSIBILITY FOR MONITORING GRANT AND PROGRAM DISTRIBUTIONS IS DISTRIBUTED TO THE THREE STRATEGIC INITIATIVES ENSURING THE JEWISH FUTURE, CARING FOR JEWS IN NEED AND COMMUNITY ENGAGEMENT EACH STRATEGIC INITIATIVE IS MANAGED BY PROFESSIONAL STAFF AND VOLUNTEERS WHO WORK TOGETHER TO IDENTIFY COMMUNITY NEEDS WITHIN THAT STRATEGIC INITIATIVE AREA THE STAFF AND VOLUNTEERS ARE RESPONSIBLE FOR DEVELOPING AN ANNUAL BUDGET AND FOR COMMUNICATING NEW PROGRAM NEEDS THAT MAY ARISE DURING THE YEAR TO EXECUTIVE MANAGEMENT, THE STRATEGIC PLANNING AND DISTRIBUTION COMMITTEE AND THE BOARD ADDITIONALLY, THEY MAY WORK WITH GRANTORS AND CONTRIBUTORS WHO FUND RESTRICTED PROGRAMS ON AN ANNUAL BASIS, PROGRAM MANAGEMENT PROPOSES A BUDGET WHICH IS APPROVED BY THE BOARD OF DIRECTORS THROUGHOUT THE YEAR, PROGRAM STAFF MONITORS THE DISTRIBUTIONS AGAINST BUDGETED ALLOCATIONS ADDITIONALLY, THE PROGRAM STAFF MONITORS THE PROGRAM CONTENT OF RESTRICTED GRANTS
SCHEDULE I, PART II	THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501(C)(3) DOMESTIC U S CHARITY IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSIDIARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501(C)(3) ORGANIZATIONS-- EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULE F

Additional Data

Software ID:  
Software Version:  
EIN: 95-1643388  
Name: Jewish Federation Council of Greater LA

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
30 YEARS AFTER1880 CENTURY PARK 1100 LOS ANGELES,CA 90067	26-1748436	501(C)(3)	47,850				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABRAHAM JOSHUA HESCHEL DAY SCHOOL 17701 DEVONSHIRE NORTHRIDGE, CA 91325	95-2794822	501(C)(3)	65,250				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADAT ARI EL12020 BURBANK BLVD VALLEY VILLAGE, CA 916072198	23-7366318	501(C)(3)	59,500				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AISH TAMID OF LOS ANGELESPO BOX 48885A LOS ANGELES, CA 90048	90-0086051	501(C)(3)	35,000				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN JEWISH UNIVERSITY15600 MULHOLLAND DRIVE BEL AIR, CA 90077	95-1684064	501(C)(3)	128,500				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAIS CHANA CHABAD HIGH SCHOOL9017 W PICO BLVD LOS ANGELES,CA 90035	46-2869189	501(C)(3)	8,687				Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAIS CHAYA MUSHKA SCHOOL FOR GIRLS9051 W PICO BLVD LOS ANGELES,CA 90035	95-4339460	501(C)(3)	33,750				Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAIS YAAKOV SCHOOL FOR GIRLS7353 BEVERLY BLVD LOS ANGELES,CA 90036	95-3127279	501(C)(3)	47,625				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BBYO ANTELOPE VALLEY 5870 WEST OLYMPIC BLVD LOS ANGELES, CA 90036	31-1794932	501(C)(3)	20,000				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEIT T'SHUVAH8831 VENICE BLVD LOS ANGELES,CA 90034	77-0152646	501(C)(3)	100,000				Local Agency Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BET TZEDEK LEGAL SERVICES3250 WILSHIRE BLVD 13TH FLOOR LOS ANGELES, CA 900101509	23-7304205	501(C)(3)	283,150				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIKUR CHOLIM8489 W3RD ST 1004 LOS ANGELES,CA 90048	95-4521980	501(C)(3)	78,260				Local Agency Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRTHRIGHT ISRAEL FOUNDATION33 EAST 33RD STREET 7TH FLOOR NEW YORK,CA 10016	13-4092050	501(C)(3)	1,588,395				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BNEI AKIVA LOS ANGELES 9030 WEST OLYMPIC BLVD LOS ANGELES, CA 90211	26-2103488	501(C)(3)	16,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BNOS DEVORAH HIGH SCHOOL461 N LA BREA AVENUE LOS ANGELES, CA 90036	20-8992789	501(C)(3)	18,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRANDEIS UNIVERSITY 415 SOUTH STREET WALTHAM, MA 02454	04-2103552	501(C)(3)	7,000				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAWERMAN ELEMENTARY SCHOOL11661 W OLYMPIC BLVD LOS ANGELES, CA 90064	95-1691339	501(C)(3)	83,161				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUREAU OF JEWISH EDUCATION6505 WILSHIRE BLVD STE 300 LOS ANGELES, CA 90048	95-4280178	501(C)(3)	1,619,091				Local Agency Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP AKIBA5249 SOUTH SEPULVEDA BLVD CULVER CITY,CA 90230	95-1932032	501(C)(3)	9,000				Camp Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP ALONIM1101 PEPPERTREE LANE BRANDEIS,CA 93064	95-1684064	501(C)(3)	192,500				Camp Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP GAN ISRAEL1444 17TH STREET 4 SANTA MONICA,CA 90404	95-4518038	501(C)(3)	7,500				Camp Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP JCA SHALOM34342 MULHOLLAND HIGHWAY MALIBU,CA 90265	84-1652923	501(C)(3)	129,750				Camp Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP RAMAH IN CALIFORNIA INC17525 VENTURA BLVD STE 201 ENCINO,CA 91316	95-1843131	501(C)(3)	312,250				Camp Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP TAWONGA131 STEUART STREET STE 460 SAN FRANCISCO,CA 94105	94-3227261	501(C)(3)	6,500				Camp Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD AT UCLA612 1/2 MIDVALE AVENUE LOS ANGELES, CA 90024	20-8274832	501(C)(3)	8,500				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD AT USC2713 SEVERANCE STREET LOS ANGELES,CA 90007	61-1442258	501(C)(3)	15,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD OF CONEJO CONEJO FRIENDSHIP CIRCLE 30345 CANW AGOURA HILLS,CA 91301	42-1607378	501(C)(3)	15,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD AT CSUN17833 PRAIRIE STREET NORTH RIDGE,CA 91325	20-8117991	501(C)(3)	12,000				General Support/Camp & Education Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAI LIFELINE9701 WEST PICO BLVD STE 120 LOS ANGELES, CA 90035	11-2940331	501(C)(3)	57,488				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHALLAH FOR HUNGER 1701 WALNUT STREET 7TH FLOOR PHILADELPHIA, PA 19103	26-1540827	501(C)(3)	45,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHEDER MENACHEM MENDEL1606 S LA CIENEGA BLVD LOS ANGELES,CA 90035	95-4434095	501(C)(3)	39,375				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONEJO JEWISH DAY SCHOOL29900 LADYFACE COURT AGOURA HILLS, CA 91301	95-4823692	501(C)(3)	9,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION NER TAMID5721 CRESTRIDGE ROAD PALOS VERDES,CA 90275	95-2546462	501(C)(3)	16,000				Student Financial Aid



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION OR AMI 26115 MUREAU ROAD B CALABASAS, CA 91302	95-4614448	501(C)(3)	20,700				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMEK HEBREW ACADEMY 15365 MAGNOLIA BLVD SHERMAN OAKS, CA 91403	95-6006492	501(C)(3)	59,250				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETTA ISRAEL CENTER 12722 RIVERSIDE DR 105 NORTH HOLLYWOOD, CA 91607	95-4308644	501(C)(3)	170,000				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD FORWARD7412 FULTON AVENUE 3 NORTH HOLLYWOOD, CA 91605	31-1734705	501(C)(3)	25,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDSHIP CIRCLE LOS ANGELES9581 WEST PICO BLVD STE 102 LOS ANGELES,CA 90035	20-3270890	501(C)(3)	30,500				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HABONIM DROR CAMP GILBOA8339 W 3RD ST LOS ANGELES,CA 90048	95-1929706	501(C)(3)	132,000				Local Agency Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARKHAM HILLEL HEBREW ACADEMY9120 WEST OLYMPIC BLVD LOS ANGELES,CA 90212	95-1662972	501(C)(3)	64,000				Camp Grants & Student fin Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEBREW UNION COLLEGE - JEWISH INST OF REL3077 UNIVERSITY AVENUE LOS ANGELES,CA 900073796	31-0537067	501(C)(3)	8,000				Scholarships & Student Financial Aid



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL 81817729 PLUMMER ST NORTHRIDGE, CA 91325	46-0893850	501(C)(3)	181,150				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL AT UCLA574 HILGARD AVENUE LOS ANGELES, CA 90024	46-0573247	501(C)(3)	283,279				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL THE FDN FOR JEWISH LIFE ON CAMPUS 800 EIGHTH STREET NW WASHINGTON,DC 20001	52-1844823	501(C)(3)	28,306				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IKAR5870 W OLYMPIC BLVD LOS ANGELES, CA 90036	20-1210098	501(C)(3)	20,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ILAN RAMON DAY SCHOOL 27400 W CANWOOD STREET AGOURA, CA 91301	95-4661185	501(C)(3)	25,250				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERFAITHFAMILYCOM90 OAK STREET 4TH FLOOR SUITE 400 NEWTON,MA 02464	04-3577816	501(C)(3)	10,000				General Support and Camp Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JAMASHREINU369 N FAIRFAX 4 LOS ANGELES,CA 90036	95-4178454	501(C)(3)	7,000				Youth Programs

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH AGENCY FOR ISRAEL633 3RD AVENUE 21ST FLOOR NEW YORK,NY 10017	23-0053483	501(C)(3)	38,500				Local Agency Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH BIG BROTHERS BIG SISTERS6505 WILSHIRE BOULEVARD 6TH FL LOS ANGELES,CA 90048	95-1691009	501(C)(3)	237,626				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FAMILY SERVICE OF LOS ANGELES3580 WILSHIRE BLVD SUITE 700 LOS ANGELES, CA 90010	95-1691013	501(C)(3)	4,040,271				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FREE LOAN6505 WILSHIRE BLVD 7TH FL LOS ANGELES,CA 90048	95-1691014	501(C)(3)	100,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH GRAD STUDENT INITIATIVE1445 S BEVERLY DRIVE LOS ANGELES,CA 90035	80-0716359	501(C)(3)	10,000				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH STUDENT UNION 9831 WPICO BLVD 101 LOS ANGELES, CA 90035	61-1420053	501(C)(3)	84,000				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH VOCATIONAL SERVICE6505 WILSHIRE BLVD LOS ANGELES,CA 90048	95-1691012	501(C)(3)	582,244				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH WORLD WATCH 5551 BALBOA BLVD ENCINO,CA 91316	20-3406211	501(C)(3)	20,000				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JQ INTERNATIONAL2138 BAXTER ST LOS ANGELES,CA 90039	68-0601176	501(C)(3)	77,000				Local Agency Support



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KADIMA HEBREW ACADEMY7011 SHOUP AVENUE WEST HILLS,CA 91307	95-3190850	501(C)(3)	54,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEO BAECK TEMPLE1300 N SEPULVEDA BLVD LOS ANGELES,CA 900491656	95-1916026	501(C)(3)	22,000				General Support and Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOS ANGELES HEBREW HIGH SCHOOL5900 SEPULVEDA BLVD SUITE 560 VAN NUYS,CA 91411	95-1644595	501(C)(3)	21,000				Emergency Cash Grant & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOS ANGELES MUSEUM OF THE HOLOCAUST6435 WILSHIRE BLVD STE 303 LOS ANGELES, CA 90048	46-0503824	501(C)(3)	35,000				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOS ANGELES ORT COLLEGE14519 W SYLVAN ST VAN NUYS,CA 91411	13-3281910	501(C)(3)	8,500				Scholarships & Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOYOLA MARYMOUNT UNIVERSITY1 LMU DRIVE MALONE 301 LOS ANGELES,CA 90045	95-1643334	501(C)(3)	20,000				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAIMONIDES ACADEMY 310 N HUNTLEY LOS ANGELES, CA 90048	95-3214146	501(C)(3)	65,500				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MALIBU JEWISH CENTER AND SYNAGOGUE24855 PACIFIC COAST HIGHWAY MALIBU, CA 90265	95-3514894	501(C)(3)	6,500				Employment Grants



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MATI ISRAELI COMMUNITY CENTER INC 6025 VALLEY CIRCLE BLVD WOODLAND HILLS,CA 91367	27-5571355	501(C)(3)	15,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAZON A JEWISH RESPONSE TO HUNGER 10495 SANTA MONICA BLVD SUITE 100 LOS ANGELES, CA 90025	22-2624532	501(C)(3)	20,000				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MESIVTA BIRKAS YITZCHAK6022 W PICO BLVD LOS ANGELES, CA 90035	38-3738151	501(C)(3)	16,437				General Grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MESIVTA OF GREATER LOS ANGELES25115 MUREAU RD HIDDEN HILLS,CA 91302	95-4621495	501(C)(3)	21,750				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILKEN COMMUNITY HIGH SCHOOL15800 ZELDINS WAY LOS ANGELES,PA 90049	95-4381008	501(C)(3)	172,000				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOISHE HOUSE339 CIRCLE AVENUE SUITE 2 LOS ANGELES, CA 90048	26-2599786	501(C)(3)	100,000				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOVING TRADITIONS115 WEST AVENUE SUITE 102 JENKINTOWN, PA 19046	34-2015014	501(C)(3)	100,700				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL COUNCIL OF JEWISH WOMEN543 N FAIRFAX AVENUE LOS ANGELES, CA 90036	95-1641433	501(C)(3)	25,000				Student Financial Aid



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NCSJ2020 K STREER NW SUITE 7800 WASHINGTON,DC 20006	13-2700517	501(C)(3)	10,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NER ARYEH12422 CHANDLER BLVD VALLEY VILLAGE, CA 91607	95-4118740	501(C)(3)	12,250				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW COMMUNITY JEWISH HIGH SCHOOL7353 VALLEY CIRCLE BLVD WEST HILLS, CA 91304	95-4805188	501(C)(3)	192,250				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NFTYPO BOX 443 WARWICK, NY 10990	13-1663143	501(C)(3)	9,500				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OCCIDENTAL COLLEGE 1600 CAMPUS ROAD LOS ANGELES, CA 90041	95-1667177	501(C)(3)	7,300				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OHEL CHANA7659 BEVERLY BLVD LOS ANGELES,CA 90036	46-2869189	501(C)(3)	7,500				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OHR HAEMET INSTITUTE 1030 S ROBERTSON BLVD LOS ANGELES,CA 90035	95-4491007	501(C)(3)	8,687				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONLINE JEWISH ACADEMY 22622 VANOWEN STREET WEST HILLS, CA 91307	90-0883147	501(C)(3)	26,000				Scholarships & Student Financial Aid



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OR HACHAIM ACADEMY 6021 LAUREL CANYON BLVD NORTH HOLLYWOOD, CA 91606	31-1777687	501(C)(3)	29,125				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORTHODOX UNION9831 W PICO BLVD LOS ANGELES, CA 90035	13-5623717	501(C)(3)	24,500				Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESENTENSE GROUP INC 131 WEST 86TH STREET 7TH FLOOR ROOM NEW YORK,NY 10024	26-3301983	501(C)(3)	59,999				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESSMAN ACADEMY OF TEMPLE BETH AM1055 S LA CIENEGA BLVD LOS ANGELES,CA 90035	95-1656370	501(C)(3)	66,000				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBOOT44 W 28TH STREET 8TH FLOOR NEW YORK, NY 10001	57-1154844	501(C)(3)	61,600				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STAR6634 VALJEAN AVE VAN NUYS, CA 91406	95-4692703	501(C)(3)	16,000				Scholarships & Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHALHEVET HIGH SCHOOL 910 S FAIRFAX AVENUE LOS ANGELES,CA 90036	95-4330860	501(C)(3)	50,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHALOM HARTMAN INSTITUTE OF NORTH AMERICAONE PENNSYLVANIA PLAZA SUITE 1606 NEW YORK,NY 10119	13-3014387	501(C)(3)	24,000				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHALOM INSTITUTE34342 MULHOLLAND HIGHWAY MALIBU, CA 90265	84-1652923	501(C)(3)	206,352				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SILVERLAKE JCC1110 BATES AVENUE LOS ANGELES,CA 90029	32-0003071	501(C)(3)	31,000				Scholarships & Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SINAI AKIBA ACADEMY 10400 WILSHIRE BLVD LOS ANGELES,CA 90024	95-2103898	501(C)(3)	81,100				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SINAI TEMPLE10400 WILSHIRE BLVD LOS ANGELES, CA 90024	95-2103898	501(C)(3)	12,500				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STAND WITH USPO BOX 341069 LOS ANGELES, CA 900341069	01-0566033	501(C)(3)	33,890				Rabbinic Leadership Program Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEPHEN S WISE TEMPLE 15500 STEPHEN S WISE DRIVE LOS ANGELES,CA 90077	95-6087552	501(C)(3)	81,250				Local Agency Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE BETH HILLEL 12326 RIVERSIDE DRIVE VALLEY VILLAGE, CA 91607	95-1765175	501(C)(3)	20,500				Education Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE ISAIAH10345 WEST PICO BLVD LOS ANGELES,CA 90064	95-1691319	501(C)(3)	15,000				Scholarships & Student Financial Aid



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE ISRAEL OF HOLLYWOOD7300 HOLLYWOOD BLVD LOS ANGELES,CA 90046	23-7383024	501(C)(3)	46,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE JUDEA5429 LINDLEY AVENUE TARZANA, CA 91356	95-6052095	501(C)(3)	7,500				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE KOLTIKVAH 20400 VENTURA BLVD WOODLAND HILLS, CA 91364	77-0005548	501(C)(3)	27,800				Student Financial Aid/Education Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JEWISH FEDERATIONS OF NORTH AMERICA UJC25 BROADWAY SUITE 1700 ATTN CELIA NEW YORK,NY 100041010	13-1624240	501(C)(3)	9,829,891				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SURVIVOR MITZVAH PROJECT2658 GRIFFITH PARK BLVD 299 LOS ANGELES,CA 90039	36-4630389	501(C)(3)	29,260				Student Financial Aid/Education Grants

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOMCHEI SHABBOSPO BOX 481270 LOS ANGELES,CA 90048	75-3002144	501(C)(3)	100,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TORAT HAYIM1210 S LA CIENEGA BLVD LOS ANGELES,CA 90035	95-4711877	501(C)(3)	19,062				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UC SANTA BARBARA HILLEL781 EMBARCADERO DEL MAR MAR ISLA VISTA, CA 93117	91-2054237	501(C)(3)	35,000				Student Financial Aid/Education Grants



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UCLA CENTER FOR JEWISH STUDIES302 ROYCE HALL BOX 951485 LOS ANGELES, CA 900951485	95-6006143	501(C)(3)	43,000				Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNION FOR REFORM JUDAISM633 THIRD AVENUE 7TH FLOOR NEW YORK, NY 100176778	13-1663143	501(C)(3)	81,800				Student Financial Aid/Education Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URJ CAMP NEWMAN235 MONTGOMERY STREET 1120 SAN FRANCISCO, CA 94104	94-1480908	501(C)(3)	18,750				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USC HILLEL3300 S HOOVER STREET LOS ANGELES,CA 90007	95-4867366	501(C)(3)	154,066				Emergency Cash Grant

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USC SHOAH FOUNDATION 650 WEST 35TH STREET SUITE 114 LOS ANGELES, CA 900892571	95-1642394	501(C)(3)	50,000				Student Financial Aid/Education Grants

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY BETH SHALOM 15739 VENTURA BLVD ENCINO, CA 91436	95-1890769	501(C)(3)	108,944				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY FRIENDSHIP CIRCLE11927 VENTURA BLVD STUDIO CITY,CA 91604	45-5351558	501(C)(3)	7,500				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY TORAH HIGH SCHOOL12517 CHANDLER BLVD VALLEY VILLAGE, CA 91607	95-3165544	501(C)(3)	44,500				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VENTURA COUNTY JEWISH FAMILY SERVICE857 EAST MAIN STREET VENTURA, CA 93001	77-0149387	501(C)(3)	16,609				General Support/Emergency Cash Grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VISTA DEL MAR CHILD & FAMILY SERVICE3200 MOTOR AVENUE LOS ANGELES, CA 90034	95-1647832	501(C)(3)	20,500				Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTSIDE JEWISH COMMUNITY CENTER5870 WEST OLYMPIC BLVD LOS ANGELES,CA 90036	95-1691010	501(C)(3)	211,746				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILSHIRE BOULEVARD TEMPLE3663 WILSHIRE BLVD LOS ANGELES, CA 900102798	95-1691339	501(C)(3)	78,500				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD ZIONIST ORGANIZATION633 3RD STREET 21ST FLOOR NEW YORK,NY 10017	13-2686230	501(C)(3)	7,000				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YAVNEH HEBREW ACADEMY5353 W 3RD ST LOS ANGELES,CA 90020	95-2117190	501(C)(3)	33,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YESHIVA AHARON YAAKOV241 S DETROIT STREET LOS ANGELES,CA 90036	95-3405695	501(C)(3)	36,437				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YESHIVA GEDOLAH OF LOS ANGELES5444 OLYMPIC BLVD LOS ANGELES, CA 90036	95-3298317	501(C)(3)	18,312				General Support



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YESHIVA OHR ELCHONON CHABAD7215 WARING AVENUE LOS ANGELES, CA 90046	95-4384473	501(C)(3)	23,625				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YESHIVA RAV ISACSOHN 540 N LA BREA AVENUE LOS ANGELES, CA 90036	95-1962397	501(C)(3)	102,625				Scholarships & Student Financial Aid

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YULA BOYS SCHOOL9760 WEST PICO BLVD LOS ANGELES,CA 90035	42-1746735	501(C)(3)	132,000				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YULA GIRLS SCHOOL1819 SOUTH ROBERTSON BLVD LOS ANGELES,CA 90035	20-3081128	501(C)(3)	27,000				Student Financial Aid

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZIMMER CHILDREN'S MUSEUM6505 WILSHIRE BLVD STE 100 LOS ANGELES,CA 90048	20-1470992	501(C)(3)	383,000				Emergency Cash Grant

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
▶ Attach to Form 990.  
▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
Jewish Federation Council of Greater LA

Employer identification number  
95-1643388

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</div><div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</div></div>	Yes	
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</div></div>		No
<div><div>3</div><div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</div></div>		
<div><div>a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>		No
<div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>		No
<div><div></div><div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div></div>		
<div><div>5</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III.</div>		No
<div><div>6</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III.</div>		No
<div><div>7</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</div></div>	Yes	
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</div></div>		No
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div></div>		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JAY SANDERSON, CEO / PRESIDENT	(i)	439,605	36,000	21,370	13,000	40,337	550,312	0
	(ii)	0	0	0	0	0	0	0
2 IVAN WOLKIND, CFO/COO	(i)	283,100	0	8,280	13,000	15,912	320,292	0
	(ii)	0	0	0	0	0	0	0
3 NANCY SACKS, EVP DEVELOPMENT OFFICER	(i)	321,943	0	22,252	13,000	17,037	374,232	0
	(ii)	0	0	0	0	0	0	0
4 ANDREW CUSHNIR, EVP CHIEF PROGRAM/DEVELOPMENT	(i)	214,202	0	8,532	62,807	243	285,784	0
	(ii)	0	0	0	0	0	0	0
5 CAROL KORANSKY, EVP DIRECTOR VALLEY ALLIANCE	(i)	207,892	0	8,668	61,408	1,989	279,957	0
	(ii)	0	0	0	0	0	0	0
6 CYNTHIA AYALA, SVP ADMINISTRATION & HR	(i)	172,876	0	9,202	51,275	2,424	235,777	0
	(ii)	0	0	0	0	0	0	0
7 DENISE OSSO, SVP CREATIVE DIRECTOR	(i)	148,216	0	2,797	47,246	20,096	218,355	0
	(ii)	0	0	0	0	0	0	0
8 JOHN MAGOULAS, ASSOC CHIEF DEV OFFICER	(i)	167,344	0	447	49,589	8,965	226,345	0
	(ii)	0	0	0	0	0	0	0
9 MITCHELL HAMERMAN, SVP CAMPAIGN MGMT & COMM	(i)	157,887	0	620	46,261	87	204,855	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A	CERTAIN EXECUTIVES ARE PROVIDED WITH AUTO ALLOWANCES AS PART OF THEIR COMPENSATION AGREEMENTS. THE ALLOWANCES ARE INCLUDED IN TAXABLE COMPENSATION.
SCHEDULE J, PART I, LINE 7	THE CEO'S EMPLOYMENT AGREEMENT PROVIDES FOR A DISCRETIONARY BONUS EACH YEAR AS MAY BE DETERMINED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS IN ITS SOLE DISCRETION.



Additional Data

Software ID:  
Software Version:  
EIN: 95-1643388  
Name: Jewish Federation Council of Greater LA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JAY SANDERSON, CEO / PRESIDENT	(i)	439,605	36,000	21,370	13,000	40,337	550,312	0
	(ii)	0	0	0	0	0	0	0
1 IVAN WOLKIND, CFO/COO	(i)	283,100	0	8,280	13,000	15,912	320,292	0
	(ii)	0	0	0	0	0	0	0
2 NANCY SACKS, EVP DEVELOPMENT OFFICER	(i)	321,943	0	22,252	13,000	17,037	374,232	0
	(ii)	0	0	0	0	0	0	0
3 ANDREW CUSHNIR, EVP CHIEF PROGRAM/DEVELOPMENT	(i)	214,202	0	8,532	62,807	243	285,784	0
	(ii)	0	0	0	0	0	0	0
4 CAROL KORANSKY, EVP DIRECTOR VALLEY ALLIANCE	(i)	207,892	0	8,668	61,408	1,989	279,957	0
	(ii)	0	0	0	0	0	0	0
5 CYNTHIA AYALA, SVP ADMINISTRATION & HR	(i)	172,876	0	9,202	51,275	2,424	235,777	0
	(ii)	0	0	0	0	0	0	0
6 DENISE OSSO, SVP CREATIVE DIRECTOR	(i)	148,216	0	2,797	47,246	20,096	218,355	0
	(ii)	0	0	0	0	0	0	0
7 JOHN MAGOULAS, ASSOC CHIEF DEV OFFICER	(i)	167,344	0	447	49,589	8,965	226,345	0
	(ii)	0	0	0	0	0	0	0
8 MITCHELL HAMERMAN, SVP CAMPAIGN MGMT & COMM	(i)	157,887	0	620	46,261	87	204,855	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
▶ Attach to Form 990.  
▶Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
Jewish Federation Council of Greater LA

Employer identification number  
95-1643388

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .	X	23	26,400	COST/SELLING PRICE
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	161	2,830,617	COST/SELLING PRICE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( STATE OF ISRAEL BOND )	X	18	100,500	COST/SELLING PRICE
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2014)

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE M, PART I, LINE 32A	ARRANGEMENT WITH CARS THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES USES THE FOR-PROFIT ORGANIZATION, CARS, AS A THIRD PARTY TO ASSIST WITH VEHICLE DONATIONS THE DONOR NOTIFIES THE FEDERATION THAT THEY PLAN TO DONATE A VEHICLE, AND ARRANGEMENTS ARE THEN MADE BETWEEN THE DONOR AND CARS FOR THE PICK UP OF THE VEHICLE CARS WILL TOW THE VEHICLE AND MAKE ALL ARRANGEMENTS NECESSARY FOR THE SALE OF THE VEHICLE ONCE THE VEHICLE HAS BEEN SOLD, CARS WILL PREPARE A LETTER TO THE DONOR THANKING THEM FOR THEIR DONATION TO THE FEDERATION, AND WILL DISCLOSE IN THE LETTER IF THE CAR WAS SOLD FOR LESS THAN OR MORE THAN \$500 CARS IS AWARDED 30% OF THE GROSS SALES PRICE LESS EXPENSES, AND THE FEDERATION RECEIVES 70% OF THE GROSS SALES PRICE LESS EXPENSES

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

**▶ Attach to Form 990 or 990-EZ.**

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

OMB No 1545-0047

**2014**

**Open to Public  
Inspection**

Name of the organization Jewish Federation Council of Greater LA	Employer identification number  95-1643388
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Return Reference	Explanation
FORM 990, PART I, LINE 1 AND PART III, LINE 1	MISSION STATEMENT BASED ON JEWISH VALUES, THE JEWISH FEDERATION OF GREATER LOS ANGELES CONVENES AND LEADS THE COMMUNITY AND LEVERAGES ITS RESOURCES TO ASSURE THE CONTINUITY OF THE JEWISH PEOPLE, SUPPORT A SECURE STATE OF ISRAEL, CARE FOR JEWS IN NEED HERE AND ABROAD, AND MOBILIZE ON ISSUES OF CONCERN TO THE LOCAL COMMUNITY, ALL WITH OUR LOCAL, NATIONAL, AND INTERNATIONAL PARTNERS

Return Reference	Explanation
FORM 990, PART III, LINE 4	<p>PROGRAM SERVICE ACTIVITY #1 - ENSURING THE JEWISH FUTURE THE FEDERATION CREATES OPPORTUNITIES FOR PEOPLE OF ALL AGES TO PARTICIPATE AND CELEBRATE IN JEWISH LIFE AND CONNECT WITH THE COMMUNITY AND ISRAEL. TO DO SO, WE WORK TO ENSURE THE QUALITY AND REDUCE THE COST OF JEWISH EDUCATIONAL EXPERIENCES, TRAIN LEADERS WHO WILL TEACH JEWISH VALUES TO NEW GENERATIONS, ENGAGE LOCAL SYNAGOGUES, THE LIFEblood OF THE JEWISH COMMUNITY, AND SEND THOUSANDS ON EDUCATIONAL MISSIONS TO ISRAEL, ENSURING THAT STRONG CONNECTIONS WILL PERSIST. AS THE HUB OF THE COMMUNITY, THE FEDERATION IS UNIQUELY POSITIONED TO CONNECT JEWS TO ONE ANOTHER AND MAKE JEWISH LIFE ACCESSIBLE AND AFFORDABLE BY LEVERAGING THE STRENGTH OF OUR MEMBERS AND WORKING CLOSELY WITH OUR NETWORK OF TRUSTED PARTNERS. PROGRAM SERVICE ACTIVITY #2 - CARING FOR JEWS IN NEED THE FEDERATION LEVERAGES THE STRENGTH OF ITS COMMUNITY TO PROVIDE AID FOR JEWS IN NEED. THE WELL-BEING OF JEWISH SENIORS IS ALSO A CORE PRIORITY, ESPECIALLY WHEN A SENIOR IS A HOLOCAUST SURVIVOR. OUR WORK ALSO INCLUDES SEEING TO DAILY NECESSITIES OF THOSE IN NEED, CONNECTING PEOPLE TO THE SKILLS AND SERVICES NECESSARY TO BE SELF-SUFFICIENT, AND ENSURING CHILDREN WITH SPECIAL NEEDS AND OTHER AT-RISK CASES HAVE THEIR NEEDS MET AND CAN PARTICIPATE IN JEWISH LIFE. THE FEDERATION IS ABLE TO CARE FOR OUR OWN COMMUNITY BY WORKING WITH PARTNERS IN LOS ANGELES, ISRAEL, AND OVER 55 COUNTRIES AROUND THE WORLD. PROGRAM SERVICE ACTIVITY #3 - COMMUNITY ENGAGEMENT FOR THE PAST 100 YEARS, THE JEWISH FEDERATION HAS ENGAGED IN OUR CITY, PROMOTING AN INCLUSIVE COMMUNITY THAT REFLECTS THE BEST OF AMERICAN AND JEWISH VALUES. THE PURSUIT OF A JUST SOCIETY, ENSURING A STRONG JEWISH FUTURE AND PROMOTING A SAFE AND VIBRANT ISRAEL ARE THE ENDURING CORNER STONES OF OUR WORK. WE ENGAGE THE COMMUNITY BY PROVIDING ROBUST SERVICE AND VOLUNTEER OPPORTUNITIES, COMBATING ILLITERACY, FIGHTING HUNGER, SHAPING POLICY AND ADVOCATING FOR ISRAEL. TOGETHER AS A COMMUNITY, AND WITH DIVERSE PARTNERS ACROSS LOS ANGELES, WE CAN SHAPE THE FUTURE OF OUR CITY FOR THE NEXT 100 YEARS.</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	LESLIE BIDER AND LYNN BIDER HAVE A FAMILY RELATIONSHIP, DEREK BROWN AND LYNETTE BROWN HAVE A FAMILY RELATIONSHIP, RODNEY FREEMAN AND HEIDI MONKARSH HAVE A FAMILY RELATIONSHIP, LEON JANKS AND SHARON JANKS HAVE A FAMILY RELATIONSHIP, AND FRANK MAAS AND VIRGINIA MAAS HAVE A FAMILY RELATIONSHIP

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	DESCRIPTION OF MEMBERS AND STOCKHOLDERS MEMBERS ARE DEFINED AS CONTRIBUTORS WHO HAVE PAID NOT LESS THAN \$100 TO THE ANNUAL COMMUNITY-WIDE FUND RAISING CAMPAIGN WITHIN THE TWELVE MONTHS PRECEDING THE DATE OF A MEMBERS MEETING

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	<p>MEMBERS OR STOCKHOLDERS WHO MAY ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY MEMBERS OF THE FEDERATION CONVENE AT LEAST BIENNIALY (BIENNIAL MEETING) AND OTHERWISE AS DEEMED NECESSARY BY THE BOARD OF DIRECTORS OR CHAIR ONE HUNDRED MEMBERS CONSTITUTES A QUORUM AT A MEETING OF THE MEMBERS MEMBERS ARE NOT ENTITLED TO VOTE OR ACT BY PROXY ONLY MATTERS OF WHICH NOTICE WAS GIVEN MAY BE ACTED UPON AT A MEMBERS MEETING THE AGENDA OF THE BIENNIAL MEETING SHALL INCLUDE THE ELECTION OF DIRECTORS PURSUANT TO THE BYLAWS MEMBERS SHALL ELECT DIRECTORS FOR A TWO-YEAR TERM AT THE BIENNIAL MEETING PRIOR TO THE BIENNIAL MEETING, THE NOMINATIONS COMMITTEE COORDINATES THE SELECTION OF PROPOSED DIRECTORS IN ACCORDANCE WITH THE PROCEDURES ENUMERATED IN THE BYLAWS VACANCIES CREATED BY RESIGNATION, DEATH, INCAPACITY OR OTHER DEPARTURE OF A DIRECTOR MAY BE FILLED BY THE CHAIR'S APPOINTMENT, FOR THE UNEXPIRED PORTION OF THE TERM, SUBJECT TO APPROVAL BY VOTE OF THE BOARD AT THE NEXT BOARD MEETING A REPLACEMENT DIRECTOR MAY SERVE ON THE BOARD BY THE CHAIR'S APPOINTMENT ON AN INTERIM BASIS UNTIL SUCH NEXT BOARD MEETING</p>



Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	PROCESS TO REVIEW THE FORM 990 THE FORM 990 IS PREPARED BY THE FEDERATION'S FINANCE STAFF A PUBLIC ACCOUNTING FIRM IS RETAINED TO REVIEW THE FORM 990 FOR THE FEDERATION WHEN THE FORM 990 IS COMPLETE, BUT BEFORE IT IS FILED, THE AUDIT COMMITTEE MEETS WITH THE CFO AND VP OF FINANCE AND REPRESENTATIVES FROM THE PUBLIC ACCOUNTING FIRM TO PERFORM A THOROUGH REVIEW OF THE FORM 990 THE BOARD HAS EMPOWERED THE AUDIT COMMITTEE TO PERFORM THIS REVIEW OF THE FORM 990 PRIOR TO FILING PRIOR TO FILING, THE MEMBERS OF THE BOARD OF DIRECTORS ARE PROVIDED AN ELECTRONIC COPY OF THE FORM 990 FOR REVIEW

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>CONFLICT OF INTEREST POLICY THE JEWISH FEDERATION HAS A WRITTEN CONFLICT OF INTEREST POLICY BOARD MEMBERS, COMMITTEE MEMBERS, OFFICERS, KEY EMPLOYEES AND SELECTED STAFF ARE SUBJECT TO COMPLIANCE WITH THE POLICY THE POLICY IS POSTED ON THE ORGANIZATION'S INTRANET ADDITIONALLY , THE POLICY IS CIRCULATED ON AN ANNUAL BASIS TO AFFECTED PERSONS ALONG WITH A QUESTIONNAIRE TO FURTHER IDENTIFY RELATIONSHIPS THAT REQUIRE DISCLOSURE ON THE FORM 990 THE POLICY DEFINES PROCEDURES FOR THE CONFLICTED PERSON AND/OR OTHERS TO ENSURE THAT BUSINESS TRANSACTIONS ARE IN THE BEST INTEREST OF THE ORGANIZATION, BUSINESS AND FAMILY RELATIONSHIPS ARE FULLY DISCLOSED, AND DISCIPLINARY MEASURES ARE ENFORCED WHEN A POTENTIAL CONFLICT OF INTEREST IS IDENTIFIED BY THE CONFLICTED PARTY OR THE JEWISH FEDERATION, THE NATURE OF THE INTEREST OR INVOLVEMENT IS IMMEDIATELY COMMUNICATED TO THE PRESIDENT, BOARD CHAIR, AND THE RESPECTIVE COMMITTEE CONSIDERING THE TRANSACTION IF THE PARTICULAR TRANSACTION REQUIRES A VOTE, THE CONFLICTED PARTY SHALL NOT BE COUNTED FOR PURPOSES OF A QUORUM NOR SHALL HE OR SHE VOTE ON THE MATTER PERSONS PREPARING AND SIGNING THE FORM 990 ARE FAMILIAR WITH BOARD MEMBERS, COMMITTEE MEMBERS, FINANCIAL TRANSACTIONS (INCLUDING CONTRACTUAL ARRANGEMENTS) AND THE RULES AND POLICIES RELATED TO CONFLICTS OF INTEREST</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	<p>PROCESS FOR DETERMINING EXECUTIVE COMPENSATION THE BYLAWS PROVIDE FOR AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE WHICH REVIEWS AND APPROVES THE COMPENSATION, INCLUDING BENEFITS, OF THE PRESIDENT, CHIEF OPERATING AND FINANCIAL OFFICER, EXECUTIVE VICE PRESIDENT OF FINANCIAL RESOURCE DEVELOPMENT, AND OTHER SELECTED EMPLOYEES WHO COMPRISE THE FIVE HIGHEST PAID EMPLOYEES OF THE FEDERATION THE REVIEW AND APPROVAL PROCESS INCLUDES ENGAGING AN OUTSIDE CONSULTANT WHO USES SALARY SURVEYS AND STUDIES OF NON-PROFIT ORGANIZATIONS TO PROPOSE A COMPENSATION PACKAGE THE REVIEW AND APPROVAL OCCURE UPON HIRING OF THE OFFICER, RENEWAL OR EXTENSION OF THE EMPLOYEE'S EMPLOYMENT AGREEMENT, OR WHEN THE COMPENSATION IS MODIFIED AFTER THE EXECUTIVE COMPENSATION COMMITTEE HAS SETTLED ON A COMPENSATION MATTER, THE RESULTS ARE REPORTED TO THE BOARD THE COMPENSATION OF THE CURRENT CHIEF EXECUTIVE OFFICER WAS APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE IN 2012 AND AND WILL BE REVIEWED AGAIN IN 2017 AS PART OF THE RENEWAL OF HIS EMPLOYMENT AGREEMENT</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	PUBLIC INSPECTION OF DOCUMENTS THE JEWISH FEDERATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION THE JEWISH FEDERATION MAKES ITS CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE ACCESSED FROM THE PUBLIC WEBSITE

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.  
▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
Jewish Federation Council of Greater LA

Employer identification number  
95-1643388

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
						Yes No
See Additional Data Table						

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproporionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) LA - STEUBENVILLE PROPERTIES INC  10866 WILSHIRE BLVD 1100 LOS ANGELES, CA 90024 20-1164918	REAL ESTATE	CA	NA	S CORP				Yes	

Part V

Transactions With Related Organizations

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b No

1c Yes

1d No

1e No

1f No

1g No

1h No

1i No

1j No

1k No

1l No

1m No

1n Yes

1o No

1p No

1q Yes

1r No

1s No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

Schedule R (Form 990) 2014

**Part VI** **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.  
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	



Part VII

Supplemental Information

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

Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 95-1643388

Name: Jewish Federation Council of Greater LA

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) ABRASBA FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 05-0545566	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(1) BERKE FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 33-0782972	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(2) BILL & BONNY LEVINE FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4199489	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(3) JACK E & RACHEL GINDI FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4068700	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(4) KASL FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4105774	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(5) KURTZMAN FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4684563	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(6) LEE & HERMAN OSTROW FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 01-0734263	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(7) LEONARD & ANNETTE SHAPIRO FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4582899	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(8) NEWTON D & ROCHELLE F BECKER FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4095134	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(9) NIZNICK FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4830603	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(10) THE GOREN FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4092926	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(11) RICHARD & ROBERTA MARANTZ FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4088934	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(12) RUTH & SONNY SINGER FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4364781	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(13) SABAN CHARITABLE SUPPORT FUND  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 68-0517051	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(14) SINDER FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4092908	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(15) STEVEN & LOTTIE WALKER FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4095677	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(16) THE EDNA & MICKEY WEISS FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4455777	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(17) THE EDWARD RAPHAEL FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 68-0493061	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(18) THE EMQUIES FAMILY SUPPORT FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 26-1573706	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(19) THE HELENE & LOUIS GALEN FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 02-0778652	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(21) THE JOYCE & LAWRENCE POWELL FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4826900	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(1) THE JUDY & BERNARD BRISKIN FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 80-0143565	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(2) THE LEVEY CHERRY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 03-0576686	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(3) THE LOUIS & JUDITH MILLER FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4773791	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(4) THE MARK SCHULMAN & ESTHER SCHULMAN FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4250205	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(5) THE MELISSA MARANTZ NEALY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 35-2303167	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(6) THE PALERMO-RAVICH FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4717551	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(7) THE PEPP FAMILY SUPPORT FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 56-2669586	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(8) THE SALTER FAMILY CHARITABLE FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-3924344	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(9) THE SEYMOUR & ELAINE MASOR FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4621783	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(10) THE SHIRLEY & BURT HARRIS FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4246144	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(11) THE TOM & SONDRY RYKOFF FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4651913	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(12) THE TRENA & STANLEY GREITZER FAMILY FDN  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4716089	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(13) THE ZIERING FAMILY FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4556596	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(14) TIKUN OLAM FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4871770	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(15) WHIZIN SUPPORT FOUNDATION  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4571058	GENERAL SUPT	CA	501(C )(3)	11, 1	JCF	Yes	
(16) JEWISH COMMUNITY FDN CHARITABLE FUND  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-3507310	GENERAL SUPT	CA	501(C )(3)	PF	JCF	Yes	
(17) JEWISH COMMUNITY FDN CHARITABLE FUND II  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4695562	GENERAL SUPT	CA	501(C )(3)	PF	JCF	Yes	
(18) JEWISH COMMUNITY FDN OF LA  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-6111928	GENERAL SUPT	CA	501(C )(3)	7	JFC	Yes	
(19) IVAN AND VILAM HALAJ FAMILY FND  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4700852	GENERAL SUPT	CA	501(C )(3)	11, 3	JCF	Yes	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
JEWISH COMMUNITY FOUNDATION OF LA	c	3,833,600	FMV
JEWISH COMMUNITY FOUNDATION OF LA	a	346,356	FMV
THE PEPP FAMILY SUPPORT FOUNDATION	c	203,500	FMV
THE JUDY & BERNARD BRISKIN FAMILY FDN	c	125,000	FMV
NIZNICK FAMILY FOUNDATION	c	125,000	FMV
THE EDNA & MICKEY WEISS FAMILY FDN	c	100,000	FMV
THE EDWARD RAPHAEL FOUNDATION	c	86,000	FMV
THE SHIRLEY & BURT HARRIS FAMILY FDN	c	50,000	FMV
THE TOM & SONDRY RYKOFF FAMILY FDN	c	50,000	FMV