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RCANNED JUN 30

Form **990** 

Department of the Treasury Internal Revenue Service Return Organization Exempt From Income Tax

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

2014 (display="block")

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

A	For th	e 2014 calendar year, or tax year beginning $$	JUN 30, 2015	
В	Check r	C Name of organization	D Employer identifica	ation number
	applicat	ROCHELLE ZELL JEWISH HIGH		
	Addr chan	ess SCHOOL		
Ē	X Name		36-41	67962
	lnıtıa returi			
Ē	Final	1005 TAVE COOK BOAD	•	70-6700
	termi ated		G Gross receipts \$	9,091,159.
	Amer	nded DEEDETELD II COOLE	H(a) Is this a group reti	
	Appli	F Name and address of principal officer:LYNN SCHRAYER	for subordinates?	Yes X No
	pend	SAME AS C ABOVE	H(b) Are all subordinates incl	
T	Tax-ex		<del></del>	st. (see instructions)
		ite: ► WWW.RZJHS.ORG	H(c) Group exemption	•
			ear of formation: 1997 M	
	art I	Summary		otato or rogar dorrinone.
_	, 1	Briefly describe the organization's mission or most significant activities TO ESTAB	LISH AND OPERA	TE A
Governance			UT NOT LIMITE	
r S	2	Check this box  if the organization discontinued its operations or disposed of r		
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	22
		Number of independent voting members of the governing body (Part VI, line 1b)	4	22
eg eg	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	228
itie	6	Total number of volunteers (estimate if necessary)	6	50
Activities &	72	Total unrelated business revenue from Part VIII, column (C), line 12	. 7a	0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
_	<del>                                     </del>	Not unrelated business taxable income noni i oni 350-1, line 54		
	8	Contributions and grants (Part VIII, line 1h)	Prior Year 1,809,538.	Current Year 5,126,734.
Revenue	9	Program service revenue (Part VIII, line 2g)	4,079,354.	
Š	40			3,960,760.
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1 657	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,657.	3,665.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,890,549.	9,091,159.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,060,550.	1,248,900.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,021,851.	3,216,149.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	<u> </u>
Š	b	Total fundraising expenses (Part IX, column (D), line 25)  383,168.		<del></del>
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,879,548.	<u>2,913,798.</u>
	18	Total expenses. Add lines 13-17 (must equal Part IX, column-(A), line 25)	6,961,949.	<u>7,378,847.</u>
	19	Revenue less expenses. Subtract line 18 from line 12	<1,071,400.>	<u>1,712,312.</u>
Net Assets or	2	[2]	Beginning of Current Year	End of Year
SSet	일 20	Total lassets (Part X, line 16)  Total liabilities (Part X, line 26)	21,837,560.	22,210,078.
ξ,	21	Total liabilities (Part X, line 26) \www.	15,394,504.	<u>14,054,710.</u>
컐	22	Net assets or fund balances. Subtract line 21 from line 20 C 5 5 5 7 8 8 8 8 8 8	6,443,056.	<u>8,155,368.</u>
	art II	Signature Block		
		ilties of perjuryal declare that I have examined this return, including accompanying schedules and sta		nowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	11/
		Salvas	5/11	116
Sig		Synature of officer President	By Date of	Duestore
He	re		, Succession	7100000
		Type or print name and title	I Data / / Law I	II DTIN
		Print/Type preparer's name Preparer's signature:	Date Check	PTIN
Pai		MARCY STEINDLER / / WY / WILLIAM	self-employed	P00573131
	parer	Firm's name MANN. WEITZ & ASSOCIATES L.L.C.	Firm's EIN	<u>36-3963131                                 </u>
USE	Only	Firm's address 111 DEER LAKE ROAD, SUTTE 125	,	
_		DEERFIELD, IL 60015	Phone no. ( <b>84</b> '	7)267-3400
<u>Ma</u>	y the II	RS discuss this return with the preparer shown above? (see instructions)	<del></del>	X Yes No
400		7 14 LHA For Paparatory Partition Act Notice and the congress instructions		Earm 000 (0014)

Form		<u>-4167962                                   </u>	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
	TO ESTABLISH AND OPERATE A CONSERVATIVE JEWISH HIGH SCHOOL	INCLUDIN	G,
	BUT NOT LIMITED TO, GRADES NINE THROUGH TWELVE.		
2	Did the organization undertake any significant program services during the year which were not listed on		
-	the prior Form 990 or 990-EZ?	Ves	X 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?	Ves	X No
3	If "Yes," describe these changes on Schedule O.	165	LAX INU
	- Control of the Cont	aurad by avacaca	
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	ie totai expenses,	and
	revenue, if any, for each program service reported	2 0 6 4	40F \
4a	(Code) (Expenses \$5, 796, 946. including grants of \$1, 248, 900. ) (Revenue \$	3,964,	
	TO OPERATE A CONSERVATIVE JEWISH HIGH SCHOOL AND TO PROMOT		
	JEWISH CULTURE AND EDUCATION, COMBINING JUDAIC STUDIES THA		
	CONSERVATIVE MOVEMENT OF JUDAISM WITH A GENERAL STUDIES PR	OGRAM. 15	<del>7</del>
	STUDENTS ATTEND.	<del></del>	
	<u> </u>		
4b	(Code) (Expenses \$		<u> </u>
		-	
		<del></del>	
		<del></del>	
		<u> </u>	<del></del>
4c	(Code) (Expenses \$ including grants of \$ ) (Revenue \$)		)
			<del></del>
		-	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 5,796,946.		
		Form 9	90 (2014)

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Form 990 (2014) SCHOOL
Part IV Checklist of Required S

SCHOOL 36-416	67962 Page	•
ROCHELL ZELL JEWISH HIGH		

	•		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 1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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		X
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	_X_	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	_X_	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<u>X</u> _	<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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		<u>X</u>
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		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			7.5
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	ا ا		7.5
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا ء ر		v
<b>^</b>	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
<u>Q</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(2014)
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Form 990 (2014) SCHOOL

Part IV Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a	_X_	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	İ		
	any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			١.,.
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			١
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

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Par				_				
	Check if Schedule O contains a response or note to any line in this Part V			╙				
		0.5	Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	25	İ					
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable	0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		٠,					
	(gambling) winnings to prize winners?	1c	X					
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	228						
	,		X					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2b_	<del> </del> -^-	<u> </u>				
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	0.		х				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a						
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b						
	la 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)?	<u>4a</u>	-	X				
ь	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		x				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solici							
Ų.	any contributions that were not tax deductible as charitable contributions?	6a		х				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
-	were not tax deductible?	6b	l					
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the p	ayor? 7a		_X_				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required		1					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109	B-C? <b>7h</b>	-					
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	<u> </u>	<u> </u>				
9	Sponsoring organizations maintaining donor advised funds.							
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<del> </del>				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	<del> </del> -					
10	Section 501(c)(7) organizations. Enter.							
a	Initiation fees and capital contributions included on Part VIII, line 12  Outcome receipts and capital contributions included on Part VIII, line 12	—						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]							
11	Section 501(c)(12) organizations. Enter.  Gross income from members or shareholders							
a	Gross income from other sources (Do not net amounts due or paid to other sources against							
b	amounts due or received from them.)							
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1.20	1					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a	<b>†</b>	<del>                                     </del>				
_	Note. See the instructions for additional information the organization must report on Schedule O	-35		<u> </u>				
ь	Enter the amount of reserves the organization is required to maintain by the states in which the							
-	organization is licensed to issue qualified health plans		1					
С	Enter the amount of reserves on hand		L					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
		For	n <b>990</b>	(2014)				

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.									
	' Check if Schedule O contains a response or note to any line in this Part VI									
Section A. Governing Body and Management										
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 22									
	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.									
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 22									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		_X_						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		_X_						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		_X_						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		_X_						
6	Did the organization have members or stockholders?	6		X						
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?	7a		_X_						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		<u> </u>						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
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	9		<u> </u>						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
			Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a		X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b								
44	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?	11a	X							
12a	b Describe in Schedule O the process, if any, used by the organization to review this Form 990  2a Did the organization have a written conflict of interest policy? If "No," go to line 13									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	_X_	x						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120								
•	in Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13		X						
14	Did the organization have a written document retention and destruction policy?	14		X						
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?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
b	Other officers or key employees of the organization	15b		X						
	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?	16a		_X_						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NONE									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vallab	le							
	for public inspection. Indicate how you made these available. Check all that apply.									
40	Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinan	cial							
20	statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records.									
20	ROBERT KRAKOWSKY - 847-470-6700									
	1095 LAKE COOK ROAD, DEERFIELD, IL 60015		_							

Form 990 (2014)

36-4167962

Page 7

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per	box,	(C) Position (do not check more the box, unless person is officer and a director/				han	compensation	(E) Reportable compensation from related	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DAVID FISHBAUM	6.00									
PRESIDENT	1.00	X		Х				0.	0.	0.
(2) MICHAEL J SMALL	10.00	,		7,		ŀ		•	•	•
IMMEDIATE PAST PRESIDENT	1.00	X		X		<u> </u>		0.	0.	0.
(3) LYNN S. SCHRAYER	16.00	ا ج		٦,				^		•
VICE PRES OF DEVELOPMENT	1.00	Х		Х		-		0.	0.	0.
(4) ROBERT EISENSTADT	5.00	. l		v				•		•
TREASURER	3.00	Х		Х				0.	0.	0.
(5) RICHARD RABINOWITZ		x		x				0.	0.	0
SECRETARY	1.00	^		^				0.	0.	0.
(6) GIGI COHEN	1.00	x						0.	0.	0.
BOARD MEMBER	1.00									<u> </u>
(7) MARGARET COHN	1.00	x						0.	0.	0.
BOARD MEMBER (8) COURTNEY STARK COPE	1.00	1		-				<u> </u>	<u>0.</u>	<u> </u>
BOARD MEMBER	1.00	x						0.	0.	0.
(9) JEFFREY ELOWE	1.00	-		_				0.		
BOARD MEMBER	2000	x						0.	0.	0.
(10) JOEL ERLICHMAN	1.00					<u> </u>				
BOARD MEMBER		x	- 1					0.	0.	0.
(11) SAM FLEISCHACKER	1.00		T					•		
BOARD MEMBER		$ \mathbf{x} $						0.	0.	0.
(12) ALAN FRANKEL	4.00									
BOARD MEMBER		x						0.	0.	0.
(13) KIM FRANKENTHAL	1.00									
BOARD MEMBER		$ \mathbf{x} $						0.	0.	0.
(14) MICHAEL FRAZIN	1.00									
BOARD MEMBER		x						0.	0.	0.
(15) KAREN L. PEACEMAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) MELISSA WEISS SPELLMAN	1.00									
BOARD MEMBER		X						0.	0.	0.
(17) RUEBEN C. WARSHAWSKY	1.00		- }							
BOARD MEMBER		X					L	0.	0.	0.
432007 11-07-14										Form <b>990</b> (2014)

432007 11-07-14

Form **990** (2014)

Part VII Section A. Officers, Directors, Trus	toos Kov Em	nlov	2005	200	4 LI	aha	et C	compensated Employe	30-410 /	902	Page C
· (A)	(B)	picy	<del>'ees</del>		<u>u m</u> C)	gne	<u> </u>	(D)	(E)		(F)
Name and title Average hours pe week		Position (do not check more than one box, unless person is both a officer and a director/trustee					h an	Reportable compensation from	Reportable compensation from related	am	timated sount of other
	(list any hours for related organizations	trustee or director	Institutional trustee	;	ıyee	Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W·2/1099·MISC)	fro	pensation om the anization I related
	below line)	Individua! t	Institution	Officer	Key employee	Highest c	Former			orga	nızatıons
(18) NINA G HARRIS	1.00	.,						•	0		0
SECOND PAST PRESIDENT	1 00	X		X				0.	0.		0.
(19) KAREN KESNER BOARD MEMBER	1.00	X						0.	0.		0.
(20) JUDITH A. LEVIN	1.00	1				<del>                                     </del>		<u> </u>			
BOARD MEMBER		X						0.	0.		0.
(21) ANTHONY FRANK	40.00								_		
HEAD OF SCHOOL	40.00			X		-		216,971.	0.	4(	0,680.
(22) BRUCE SCHER	40.00	┨				x		111,161.	0.	2'	7,978.
ACADEMIC DEAN (23) ROBERT KRAKOWSKY	40.00					^		111,101.	•	4	,,,,,,,,
DIRECTOR OF FINANCE AND BU						x		111,077.	0.	20	0,820.
								•			
						-					
		1									
1b Sub-total	1	<u> </u>	٠	J	·		<b>•</b>	439,209.	0.		9,478.
c Total from continuation sheets to Part V	II, Section A							0.	<u> </u>		0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but r	not limited to th		liete	ed al	hove	e) w/	20 re	439,209.		0:	9,478.
compensation from the organization								- The state of the	,,ooo or roportubio		3
3 Did the organization list any former officer,	director, or tri	uste	e. ke	ev en	nolo	ovee	or h	nighest compensated e	mplovee on		Yes No
line 1a? If "Yes," complete Schedule J for s				•	•	•			, ,	3	x
4 For any individual listed on line 1a, is the si									the organization		.,
<ul><li>and related organizations greater than \$15</li><li>Did any person listed on line 1a receive or</li></ul>									dual for services	4	X
rendered to the organization? If "Yes," com	•				•					5	х
Section B. Independent Contractors											
1 Complete this table for your five highest co										sation fr	rom
the organization. Report compensation for (A)	the calendar y	ear	enai	ng v	vitn	or w	itnin	the organization's tax (B)	year	(C	······································
Name and business	address	N	INC	Ξ			_	Description of s	ervices (	Comper	
-											<u></u>
							_				
<del>.</del>	<del>-</del>						$\dashv$	<del></del>			
2 Total number of independent contractors (		not li	mıte	d to		se li N	sted	above) who received m	nore than		

Form **990** (2014)

ROCHELI
Form 990 (2014) SCHOOL
Part VIII Statement of Revenue

<u> 36-4167962</u>	Page 9

Total revenue Bellet de reseauch de la Federated campaigne beneficie de la Federated campaigne beneficie de la Federated campaigne beneficie de la Federated campaigne beneficie de la Federated campaigne beneficie de la Federated campaigne de la Federated campaigne beneficie de la Federated campaigne de			Check if Schedule O cont	ains a response	or note to any lu	ne in this Part VIII			
a Federated campaigns b Membership dues the find range events c Fundraang events d Related organizations e Government grants (contributions) file file file file file file file file						(A)	Related or exempt function	Unrelated business	Revenue excluded from tax under
2 a STUDENT TUITION & FEES b c c c d d d d d d d d d d d d d d d d	ats ts	1 a	Federated campaigns	1a					
2 a STUDENT TUITION & FEES b c c c d d d d d d d d d d d d d d d d	ra n		· =			1			
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	S,E								
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	# F		<u> </u>		690,904.				
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	S,E		•		•	Ī			1
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	ë S					1			
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	돌				435,830.				
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	들의	g	Noncash contributions included in lines	· · · · · · · · · · · · · · · · · · ·					
2 a STUDENT TUITION & FEES b c c d d d d d d d d d d d d d d d d d	<u>a</u> S	_				5,126,734.			
Begin and sales expenses c Gan or (loss) d Net rental income from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less: cost or other basis and sales expenses c Gan or (loss) d Net rental income or (loss) c Sa Gross income from fundraising events (not including \$8\$ income from fundraising events (not including \$8\$ income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of ogds sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue  11 a MISCELLANEOUS  9 00099 3,665, 3,665,  1 3,665,  9 00099 3,665, 3,665,  9 00099 3,665, 3,665,  9 00099 9 3,665, 3,665,  9 00099 9 3,665, 3,665,									
Total. Add lines 2a2f    Total. Add lines 2a2f   Total	9	2 a	STUDENT TUITION	1 & FEES	611600	3,960,760.	3,960,760.		
Total. Add lines 2a2f    Total. Add lines 2a2f   Total	e Z	b	·						
Total. Add lines 2a2f    Total. Add lines 2a2f   Total	S al	c	·						
Total. Add lines 2a2f    Total. Add lines 2a2f   Total	e a	d	·						
Total. Add lines 2a2f    Total. Add lines 2a2f   Total	S <sub>H</sub>	e							
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax exempt bond proceeds 5 Royalites  (i) Real (ii) Personal  6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue  8usiness Code 11 a MISCELLANEOUS 900099 3,665. 3,665.	ه ا	f	All other program service reve	enue					
other similar amounts)  Income from investment of tax-exempt bond proceeds  Royalties  Royalties  (i) Real (ii) Personal  b Less rental expenses c Rental income or (loss) d Net rental income or (loss) Ta Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) c Net income or (loss) from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665. 3,665.	$\longrightarrow$	g	Total. Add lines 2a-2f		<u> </u>	3,960,760.			
A   Income from investment of tax-exempt bond proceeds   Royalties   (i) Real   (ii) Personal		3	Investment income (including	dividends, intere	est, and				
For Applies    (i) Real   (ii) Personal					<b>&gt;</b>				
(i) Real   (ii) Personal				x-exempt bond p	proceeds				
6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Garn or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$		5	Royalties			-			
b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) e Part IV, line 18 b Less: direct expenses c Net income or (loss) from gaming activities 9 a Gross income from gaming activities 9 a Gross sales of inventory, less returns and allowances b Less: ots of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code 11 a MISCELLANEOUS 9 0 0 0 9 9 3 , 665 .  d All other revenue				(i) Real	(II) Personal				
c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue  Business Code 11 a MISCELLANEOUS b C All other revenue						-			
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) a Gross income from fundraising events (not including \$		b	•			-			
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gam or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$		C	•			-			
assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$									<del> </del>
b Less: cost or other basis and sales expenses c Gann or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	1	7 a		(i) Securities	(ii) Other	-			
and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code 11 a MISCELLANEOUS b C Let Income or (loss) from sales of inventory All other revenue		_	•			-			
C Gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLIANEOUS 900099 3,665.  4 All other revenue		b							*
d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	1		· ·			-			
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code 11 a MISCELLANEOUS 900099 3,665. 3,665.					L	-			
Including \$ of contributions reported on line 1c) See Part IV, line 18	ĺ		• ,						
contributions reported on line 1c) See Part IV, line 18  b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a MISCELLIANEOUS b C d All other revenue		ва		•					
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less' cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665.  4 All other revenue	ě								
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less' cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665.  4 All other revenue	8		· ·	•					
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less' cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665.  4 All other revenue	je	L				-			
9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665.  4 All other revenue	ŏ		•			-			
Part IV, line 19  b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code 11 a MISCELLANEOUS  b  c d All other revenue							-		
b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less' cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665. 3,665.	i	9 a	<del>-</del> _ <del>-</del>						
c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665. 3,665.		h					i		
10 a Gross sales of inventory, less returns and allowances  b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665. 3,665.			·			-			
and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS  b			·	=					
b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS 900099 3,665.  3,665.	ł		*						
C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a MISCELLANEOUS  D  C  d All other revenue		b							
Miscellaneous Revenue   Business Code									
11 a MISCELLANEOUS 900099 3,665. 3,665.  b	Ī				Business Code				
b c d All other revenue	ſ	11 a					3,665.		
c d All other revenue	Į								
	İ	С				-			
0 Total Add Inco 11c 11d		d	All other revenue						
		е	Total. Add lines 11a-11d		<b>&gt;</b>	3,665.			
12   Total revenue. See instructions.   9,091,159.3,964,425.   0.   0.   432009	43200		Total revenue. See instructions.			<u>9,091,159.</u>	3,964,425.	0	. 0.

### SCHOOL

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 (**D**) Fundraising (A) Total expenses (C) Do not include amounts reported on lines 6b, Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 1,248,900. 1,248,900 individuals See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 241,580. 241,580 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,559,958. 1,726,424 620,309. 213,225. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 50,141 29,855. 15,001. 5,285. 179,911. 107,743. 53,366. 18,802. Other employee benefits 184,559. 128,547. 41,419. 14,593. Payroll taxes 10 Fees for services (non-employees): Management 4,446 4,446 Legal 24,979. 24,979 c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 45,326. 45,326 32,241 32,241 Advertising and promotion 12 82,576. <u>82,576</u>. Office expenses 13 83,663 83,663 14 Information technology Royalties 15 468,326 420,433 24,907 22,986. Occupancy 16 Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 40,270. 40,270. 805,397. 724,857. Interest 20 Payments to affiliates 21 672,937 33,647. 605,643 33,647. Depreciation, depletion, and amortization 22 <u>58,8</u>25. 18,572. 38,134 2,119. 23 Insurance 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.) <u>313,823.</u> ACADEMIC/ATHLETIC PROGR <u>313,823</u>, ISRAEL EXPERIENCE 129,888 129,888. c BAD DEBT EXPENSE 95,369. 95,369. 54,209 54,209. d MARKETING & RECRUITMENT 41,793. 35,793. 6,000. e All other expenses 7,378,847. 5,796,946. 1,198,733. 383,168. Total functional expenses. Add lines 1 through 24e 25 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 ıf following SOP 98-2 (ASC 958-720)

Form 990 (2014)
Part X Balance Sheet

Pa	rt X	Balance Sheet		
		Check if Schedule O contains a response or note to any line in this Part X		
	r <del>*</del>	•	(A) Beginning of year	(B) End of year
	1	Cash - non-interest-bearing		
	2	Savings and temporary cash investments	70,723. 2	
	3	Pledges and grants receivable, net	486,762. s	
	4	Accounts receivable, net	79,709. 4	
	5	Loans and other receivables from current and former officers, directors,		
		trustees, key employees, and highest compensated employees. Complete		
		Part II of Schedule L	5	
	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 contributin		
		employers and sponsoring organizations of section 501(c)(9) voluntary		
S.		employees' beneficiary organizations (see instr). Complete Part II of Sch L	6	.
Assets	7	Notes and loans receivable, net	7	i
ğ	8	Inventories for sale or use	8	
	9	Prepaid expenses and deferred charges	13,787. 9	
	10a	Land, buildings, and equipment cost or other		<u> </u>
		basis Complete Part VI of Schedule D 10a 24,328,036	; <b>.</b>	
	ь	Less: accumulated depreciation 10b 4,891,107	20,011,473. 10	c 19,436,929.
	11	Investments - publicly traded securities	1.	
	12	Investments - other securities See Part IV, line 11	12	
	13	Investments - program-related. See Part IV, line 11	13	
	14	Intangible assets	14	
	15	Other assets See Part IV, line 11	1,175,106. 1	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	21,837,560. 16	
	17	Accounts payable and accrued expenses	256,967. 17	
	18	Grants payable	18	
	19	Deferred revenue	397,449.	351,788
	20	Tax-exempt bond liabilities	14,410,343. 20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	2:	
ģ	22	Loans and other payables to current and former officers, directors, trustees,		
≝		key employees, highest compensated employees, and disqualified persons		
Liabilities		Complete Part II of Schedule L	22	2
5	23	Secured mortgages and notes payable to unrelated third parties	23	3
	24	Unsecured notes and loans payable to unrelated third parties	24	1
	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	329,745. 25	1,617,915.
	26	Total liabilities. Add lines 17 through 25	15,394,504. 26	14,054,710.
		Organizations that follow SFAS 117 (ASC 958), check here   X and		
es		complete lines 27 through 29, and lines 33 and 34.		
anc	27	Unrestricted net assets	5,959,364. 27	6,802,196.
Sala	28	Temporarily restricted net assets	483,692. 28	1,353,172.
שפו	29	Permanently restricted net assets	29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶		
ō		and complete lines 30 through 34.		
ets	30	Capital stock or trust principal, or current funds	30	)
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund	31	
et,	32	Retained earnings, endowment, accumulated income, or other funds	32	
Z	33	Total net assets or fund balances	6,443,056. 33	
	34	Total liabilities and net assets/fund balances	21,837,560. 34	

Form **990** (2014)

	R	ROCHELL	JEWISH HIG	H		
Form 990 (	(2014) S	CHOOL			 36-4167962	Page <b>12</b>
Part XI	Reconciliation of	f Net Assets			 	·
	Check if Schedule O.c.	contains a response or not	te to any line in this l	art XI		

_	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	9,091,159.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,378,847.
3	Revenue less expenses Subtract line 2 from line 1	3	1,712,312.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,443,056.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		
	column (B))	10	8,155,368.
<b>D</b> -	-t VIII Et a a stat Out to a state of Day at the		

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII			$\Box$
		Yes	No
Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
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			
Separate basis Consolidated basis Both consolidated and separate basis			
Were the organization's financial statements audited by an independent accountant?	2b	X	ļ
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			ĺ
consolidated basis, or both.			
Separate basis Consolidated basis X Both consolidated and separate basis			
If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			l
review, or compilation of its financial statements and selection of an independent accountant?	2c	X_	l
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
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?	3a		X
If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			1
or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		L
	Form	990	2014
	Accounting method used to prepare the Form 990	Accounting method used to prepare the Form 990	Accounting method used to prepare the Form 990

### **SCHEDULE A**

(Form 990 or 990-EZ)

Name of the organization

**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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. ROCHELLE ZELL JEWISH HIGH

Employer identification number

		SCHO	OL					3	6-4167962
Pa	ırt I	Reason for Public (		All organizations must co	omplete th	ıs part ) Se	e instructions		
The	organ	ization is not a private found	ation because it is (	For lines 1 through 11, o	heck only	one box)			
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1	I)(A)(i).		
2	$\mathbf{x}$	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3		A hospital or a cooperative		·	ection 170	)(b)(1)(A)(i	ii).		
4		A medical research organiz					•	iii). Enter	the hospital's name.
٠		city, and state	•	,				,	,
5		An organization operated for	or the benefit of a co	llege or university owner	d or operat	ted by a g	overnmental un	ut describ	ned in
_		section 170(b)(1)(A)(iv). (C				, 3			
6		A federal, state, or local gov		nental unit described in	section 17	70/6\/4\/A\	(A)		
7	一	An organization that norma	•				• •	a gonoral	nublic described in
•		section 170(b)(1)(A)(vi). (Co	•	illiai part of its support i	ioin a gov	Cirinicinai	unic or nom un	e general	public described in
				(4VAV:::) (Complete Bor	F 11 V				
8	H	A community trust describe							
9	ш	An organization that norma		-	•			•	•
		activities related to its exen		·-					•
		income and unrelated busin		(less section 511 tax) tr	om busine	sses acqu	irea by the org	anization	aπer June 30, 1975
		See section 509(a)(2). (Cor			<b>6</b> 1 0 0 -				
10	$\vdash$	An organization organized a	<u>-</u>	•	•				
11		An organization organized a	•	-	•			•	• •
		more publicly supported or							neck the box in
		lines 11a through 11d that				•		-	
а	· L		•	·		•			• •
		the supported organization	•	• • • •	a majority	of the dire	ctors or trustee	s of the s	supporting
	r	organization You must o	-						
b	)	☐ Type II. A supporting org					•		•
		control or management o			ame perso	ons that co	ontrol or manag	e the sup	ported
		organization(s) You mus	•						
C	:		•				-	ıntegrate	ed with,
	_	its supported organization							
C		☐ Type III non-functionally						•	• •
		that is not functionally int	-	•	•		•	an attent	iveness
		requirement (see instructi	•	•	-				
е	•						ı Type I, Type II	, Type III	
		functionally integrated, or	= :	nally integrated support	ing organiz	zation			
f		er the number of supported o	ū						
g		vide the following information	about the supporte	d organization(s) (iii) Type of organization	(w) is the o	raanization	(u) Amount of n		(vi) Amount of
	,	i) Name of supported organization	(11) 5114	(described on lines 1-9	listed i	n your	support (s		other support (see
				above or IRC section		document?	Instruction		Instructions)
				(see instructions))	Yes	No			,
			-						
					-				
									!
				-					
_					,				
Tat.	~ I					1			i e

LHA For Paperwork Reduction Act Notice, see the Instructions for

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

### (Form 990 or 990 EZ) 2014 SCHOOL 36-4167962 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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)

Sad	ction A. Public Support		· · · · ·	<u> </u>			
	<del>-</del>	4.3.0040	#1 0011	(-) 0010	4-0.0010	4-> 0014	In Tabal
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")					<del> </del>	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to			ļ			
	the organization without charge		ļ				
4	Total. Add lines 1 through 3						
5	The portion of total contributions			İ			
	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)						
	Public support. Subtract line 5 from line 4						
Se	ction B. Total Support		•		_		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ions)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and stop	here					
Se	ction C. Computation of Publi	c Support Pe	rcentage				
14	Public support percentage for 2014 (li	ne 6, column (f) d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2013	Schedule A, Part	t II, line 14			15	<u>%</u>
16a	33 1/3% support test - 2014. If the o	rganization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	oorted organizatioi	n			
t	33 1/3% support test - 2013. If the o	rganization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization quali	fies as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances test	r - <b>2014.</b> If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	a 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"			_		•	▶□
b	10% -facts-and-circumstances test	_			-	17a, and line 15 is	10% or
	more, and if the organization meets th	•	•				
	organization meets the "facts-and-circ						ightharpoons
18	Private foundation. If the organization		-		· ·		s D
			•			edule A (Form 990	

### Part III | Support 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	elow, please com	ipiete Part II )		<del></del>		
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and	(4) 20.0	(5) 25 1 1	(0/20.2	(0) 20 10	(0/20.	(i) rota:
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions,		<del> </del>				
merchandise sold or services per-						
formed, 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 bus-	j				}	
iness under section 513	i <b>)</b>					
4 Tax revenues levied for the organ-				·		
ization's benefit and either paid to	I					
or expended on its behalf	1					
5 The value of services or facilities		<del></del>		<del></del>	<del>                                     </del>	
_	I					
furnished by a governmental unit to	I					
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	1					
exceed the greater of \$5,000 or 1% of the	I					
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)	····	1	<u> </u>			
Section B. Total Support		ı	1	T	T	
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on	I					
securities loans, rents, royalties	I					
and income from similar sources						
<b>b</b> Unrelated business taxable income	I					
(less section 511 taxes) from businesses	I					
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business	I					·
activities not included in line 10b, whether or not the business is	I					
regularly carried on	I					
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part VI)	1					
13 Total support. (Add lines 9, 10c, 11, and 12)	. <del>_</del>					
14 First five years. If the Form 990 is for	the organization	's first, second, thii	rd, fourth, or fifth ta	ax vear as a secti	on 501(c)(3) organiz	ation.
check this box and stop here	ū			,	(-)(-)	▶□
Section C. Computation of Publ	ic Support Pe	ercentage				
15 Public support percentage for 2014 (I			column (fl)		15	
16 Public support percentage from 2013		•			16	
Section D. Computation of Inves					<del></del>	
17 Investment income percentage for 20					17	-
18 Investment income percentage from 2			,		18	
19a 33 1/3% support tests - 2014. If the			on line 14, and line	e 15 is more than	<u> </u>	
more than 33 1/3%, check this box a	=				•	. 15 Hot
b 33 1/3% support tests - 2013. If the						and
line 18 is not more than 33 1/3%, che						
20 Private foundation if the organization					_	<b>!</b>

### 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.	ΑII	Supp	orting	Org	anizations
---------	----	-----	------	--------	-----	------------

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

_	Yes	No
	162	140
1	-	
2		
3a		
3b		
3c		
4a		
1.2		
4b		
4c		
5a		
5b 5c		
6		
7	$\vdash$	
8		
9a	$\vdash$	
9b		
9c		
_10a		
04	<del>                                     </del>	
*		

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
_	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	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		
	ction B. Type I Supporting Organizations			
	Alon Di Typo i dupporting di game anono		Yes	No
4	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		l .	
	tax year? If "No," describe in Part VI 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	1		<b></b>
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			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		<u> </u>
<u>Sec</u>	ction 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 Part VI how control	-		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	11		
<u>Sec</u>	ction D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		1
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			ĺ
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		l
Sec	ction 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 instruction			
		13 <i>)</i> .		
a				
b		ınatı iations	à	
C		msuucuons		N.
2	Activities Test Answer (a) and (b) below.		Yes	No
а				l
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			l
	that these activities constituted substantially all of its activities	2a		<del></del>
b				1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	}		1
	reasons for the organization's position that its supported organization(s) would have engaged in these			1
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b				
	of the constraint and assessment of the War III decreases as Do A.W. Also real relationship to the constraint of the con	۱	1	1

432025 09-17-14

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	COTTO	-	

Sche	dule A (Form 990 or 990-EZ) 2014 SCHOOL			36-4167962 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on I	Nov. 20, 1970. See in	structions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			1
а	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		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI).			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		_
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
-5	Income tax imposed in prior year	5		

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

	JEWISH HIGH	<b>—</b>	C 4167060
t V Type III Non Eurotionally Integrated 500	(a)(2) Supporting Orga		6-4167962 Page 7
<del></del>	(a)(a) Supporting Orga	ariizations (continuea)	Current Veer
	mot purposes		Current Year
		•	
	or barboses of supported		
	es of supported organization		
	es of supported organization		-
	<u>-</u>		
	he organization is responsive	·	
• • • •	ne organization is responsive	<del>-</del>	
Line 6 amount divided by Line 9 amount	(1)	(ii)	(iii)
		' '	(iii) Distributable
on E - Distribution Allocations (see instructions)	Excess Distributions		Amount for 2014
Distributable amount for 2014 from Section C. line 6		F16-2014	Alliount for 2014
		18	
Excess distributions carryover, if any, to 2014.			
· · · · · · · · · · · · · · · · · · ·		1-	
From 2012			
		<u> </u>	· · · · · · · · · · · · · · · · · · ·
•			
· · · · · · · · · · · · · · · · · · ·			
<del>-</del>			
•			
	dule A (Form 990 or 990-EZ) 2014 SCHOOL  Type III Non-Functionally Integrated 509 on D - Distributions  Amounts paid to supported organizations to accomplish exe Amounts paid to perform activity that directly furthers exemple organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purpose Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6	Type III Non-Functionally Integrated 509(a)(3) Supporting Organ D - Distributions  Amounts paid to supported organizations to accomplish exempt purposes  Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity  Administrative expenses paid to accomplish exempt purposes of supported organizations, in excess of income from activity  Administrative expenses paid to accomplish exempt purposes of supported organization Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required)  Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.  Distributable amount for 2014 from Section C, line 6  Line 8 amount divided by Line 9 amount  (i)  Excess Distributions  Distributable amount for 2014 from Section C, line 6  Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)  Excess distributions carryover, if any, to 2014.  From 2013  Total of lines 3a through e  Applied to underdistributions of prior years  Applied to 2014 distributable amount  Carryover from 2009 not applied (see instructions)  Remainder. Subtract lines 3g, 3h, and 3i from 3f  Distributions for 2014 from Section D, line 7:  \$ Applied to underdistributions of prior years  Applied to underdistributions of prior years  Applied to underdistributions for years prior to 2014, if any Subtract lines 4a and 4b from 4  Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).  Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).	dule A (Form 990 or 990-EZ) 2014 SCHOOL  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) on D - Distributions  Amounts paid to supported organizations to accomplish exempt purposes  Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity  Administrative expenses paid to accomplish exempt purposes of supported organizations.  Amounts paid to acquire exempt use assets  Qualified set saide amounts (pror IRS approval required)  Other distributions (describe in Part VI) See instructions  Total annual distributions, Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  Distributions for 2014 from Section C, line 6  Underdistributions Allocations (see instructions)  Excess Distributions  Distributions and the representation of the section C, line 6  Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)  Excess distributions carryover, if any, to 2014.  From 2013  Total of lines 3a through e  Applied to 2014 distributable amount  Carryover from 2009 not applied (see instructions)  Remainder. Subtract lines 3g, 3h, and 3i from 3f  Distributions for 2014 from Section D, line 7:  \$ Applied to 2014 distributable amount  Remainder. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)  Remainder. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)  Remaining underdistributions carryover to 2015. Add lines 3j and 40.

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013 e Excess from 2014

### ROOLLE ZELL JEWISH HIGH

Schedule A	(Form 990 or 990-EZ) 2014 SCHOOL	36-4167962 Page 8
Part VI	(Form 990 or 990-EZ) 2014 SCHOOL  Supplemental Information. Provide the explanations required by Part II, I	ne 10. Part II. line 17a or 17b, and Part III. line 12
	Also complete this part for any additional information. (See instructions)	,
	Also complete this part for any additional information. (See instructions)	<del></del>
•		
		<del>.</del>
···		
		***
		. <u> </u>
		······

### **SCHEDULE D**

(Form 990)

**Supplemental Financial Statements** 

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ROCHELLE ZELL JEWISH HIGH

**Employer identification number** 36-4167962

	SCHOOL	<u>36-4167962</u>
Pai	rt 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	do
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised f	
_	are the organization's property, subject to the organization's exclusive legal control?	└ Yes
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be use	*
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose con	
D-	impermissible private benefit?	Yes No
Pa		V, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)  Preservation of a historical	• •
	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 Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the org	anization 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
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	g 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)(ı)?	L∐ Yes L∐ No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense sta	tement, 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	
Pai	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Othe	r 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	·
	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	<b>▶</b> \$
	(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	n, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenue included in Form 990, Part VIII, line 1	<b>▶</b> \$
b	Assets included in Form 990, Part X	> \$ > \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

E ZELL JEWISH HIGH 36-4167962 Page 2 Schedule D (Form 990) 2014 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) 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): □ Public exhibition Loan or exchange programs Scholarly research Other X Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets X No to be sold to raise funds rather than to be maintained as part of the organization's collection? 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 X No \_ Yes on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table Amount c Beginning balance <u>1c</u> Additions during the year 1d Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

	ii 103, explain the arrangement iii art xiii	Officer field if the ex	pianation has been	provided in Lart Am		
Pa	Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	7,856,252.	7,676,981.	7,190,938,	7,098,340.	6,712,477.
b	Contributions	383,944.	293,430.	685,313,	782,858.	448,167.
C	Net investment earnings, gains, and losses	<14,453.	647,848,	428,244,	261,255.	85,571.
d	Grants or scholarships	1,690,904.	761,500,	627,500,	951,485.	147,642,
е	Other expenditures for facilities and programs		:			
f	Administrative expenses	10.	507.	14,	30.	233.
g	End of year balance	6,534,829.	7,856,252.	7,676,981.	7,190,938.	7,098,340.
•	Drawda the actimated percentage of the our	rant waar and halana	o (lino 1 a column (a	)) hold oo		•

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

а	Board designated or quasi-endowment	100.00	%
b	Permanent endowment ▶	%	

c Temporarily restricted endowment ▶ \_\_\_\_\_\_%
The percentages in lines 2a, 2b, and 2c should equal 100%.

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

by.(i) unrelated organizations

(ii) related organizations

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

4	Describe in Part XIII the	intended uses of t	f 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		2,953,426.		2,953,426.
<b>b</b> Buildings		20,324,532.	4,061,231.	16,263,301.
c Leasehold improvements				
d Equipment		936,363.	829,876.	106,487.
e Other		113,715.		113,715.
Total, Add lines 1a through 1e (Column (d) mus	st equal Form 990. Part X. colu	mn (B), line 10c )	•	19,436,929.

Schedule D (Form 990) 2014

EWISH	HIGH	

Schedule D (Form 990) 2014 SCHOOL		36	5-4167962 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or en	d-of-year market value
(1) Financial derivatives		<u></u>	·
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)		·	
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			d of coor manufest colors
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-or-year market value
(1)			
(2)			<del>*.</del> .
(3)			<del></del>
(4)			<del> </del>
(5)			<del></del>
(6)	·	· -	
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.		1	
Complete if the organization answered "Yes"	to Form 990 Part IV line	11d See Form 990 Part V line 15	
	Description	Tru See Form 950, Fait A, line 15	(b) Book value
(1) BOND ISSUE COSTS			96,739.
(2) FUNDS HELD BY OTHERS		<del></del>	1,025,265.
(3)		***	1,023,203.
(4)			1
(5)			
(7)		<del>,</del>	-
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)	<b>&gt;</b>	1,122,004.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	<b>;</b>
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) ACCRUED BOND INTEREST		178,005.	
(3) DUE TO ROCHELLE ZELL JEWI	SH HIGH		
(4) SCHOOL ENDOWMENT FUND		1,439,910.	
(5)			
(6)			
(7)			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2014

(8) (9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

1,617,915.

Schedule D (Form 990) 2014 SCHOOL    Part XI   Reconciliation of Revenue per Audited Financial State	ements With Revenue per F		Page 4
Complete if the organization answered "Yes" to Form 990, Part IV, line	12a		
Total revenue, gains, and other support per audited financial statements		1 7,842,	259.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2a	]	
<b>b</b> Donated services and use of facilities	2b	]	
c Recoveries of prior year grants	2c	1	
d Other (Describe in Part XIII)	2d	]	
e Add lines 2a through 2d		2e	0.
3 Subtract line 2e from line 1		3 7,842,	259.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	]	
b Other (Describe in Part XIII )	4b 1,248,900.	]	
c Add lines 4a and 4b		4c 1,248,	900.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 9,091,	<u>159.</u>
Part XII Reconciliation of Expenses per Audited Financial Stat	ements With Expenses per	Return.	
Complete if the organization answered "Yes" to Form 990, Part IV, line	12a		
Total expenses and losses per audited financial statements		1 6,129,	947.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a	]	
<b>b</b> Prior year adjustments	2b	]	
c Other losses	2c	]	
d Other (Describe in Part XIII )	2d	]	
e Add lines 2a through 2d		2e	0.
3 Subtract line 2e from line 1		з 6,129,	947.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	]	
b Other (Describe in Part XIII )	4b 1,248,900.		
c Add lines 4a and 4b		4c 1,248,	900.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	)	5 7,378,	847.
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,		4; Part X, line 2, Part X	3,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information.		
PART III, LINE 4:			
PART III, DINE 4.			
PAINTED GLASS WINDOWS WERE DONATED FROM A	CHICAGO SYNAGOGUE	THAT WAS	
CLOSING, WITH THE GOAL OF PRESERVING JEWIS	H SPIRITUALITY FOR	FUTURE	
GENERATIONS.			
	_		
PART V, LINE 4:			
THE ENDOWMENT FUNDS HELD BY ROCHELLE ZELL	JEWISH HIGH SCHOOL	ENDOWMENT	
FUND ARE INTENDED TO HELP THE HIGH SCHOOL	FULFILL ITS MISSIC	N OF ENABLI	.NG
STUDENTS TO DEVELOP THE ATTITUDES, SKILLS	AND WORK HABITS NE	CESSARY TO	
EXCEL IN COLLEGE AND THROUGHOUT LIFE.		-	
PART X. LINE 2:			
PART X, LINE 2:		Schedule D (Form 9	90) 2014
10-01-14		Conedule D (FOIII) 3	JUJ ZU 12

Part XIII   Supplemental Information (continued)
THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION TAKEN OR EXPECTED TO BE
TAKEN ARE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE LIKELY
THAN NOT, BASED ON THE TECHNICAL MERITS, THAT THE POSITION WILL BE
SUSTAINED UPON EXAMINATION. AS OF JUNE 30, 2015, THE SCHOOL HAD NO
UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE
FINANCIAL STATEMENTS. THE FEDERAL AND STATE TAX RETURNS OF THE SCHOOL FOR
TAX YEARS 2011, 2012 AND 2013 ARE SUBJECT TO EXAMINATION BY THE INTERNAL
REVENUE SERVICE AND STATE TAXING AUTHORITIES, GENERALLY FOR THREE YEARS
AFTER THEY WERE FILED.
PART XI, LINE 4B - OTHER ADJUSTMENTS:
SCHOLARSHIPS NETTED WITH TUITION ON FINANCIAL STATEMENTS
PART XII, LINE 4B - OTHER ADJUSTMENTS:
SCHOLARSHIPS NETTED WITH TUITION ON FINANCIAL STATEMENTS

### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Part I

### Schools

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

2014

Open to Public Inspection

Name of the organization

ROCHELLE ZELL JEWISH HIGH SCHOOL

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

Employer identification number

Schedule E (Form 990 or 990-EZ) (2014)

36-4167962

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain.			
	If you need more space, use Part II	3	X	
	The second secon			
		ļ		
			i	
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4-	X	
		4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Λ	
С	, , , , , , , , , , , , , , , , , , ,		v	
_	admissions, programs, and scholarships?	4c	X	
a	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II			İ
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		х
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g g	A11.1	5g		X
9 h		5g 5h		X
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II.	_311		
	if you answered Tes to any of the above, please explain if you need more space, use Fart II.			
0.	Does the executation receive one financial aid or constants from a recommendation of			v
6a	,	6a		X
D	Has the organization's right to such aid ever been revoked or suspended?	6b_		_X_
_	If you answered "Yes" to either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of			
	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

432061 10-02-14

### ROO LLE ZELL JEWISH HIGH

Schedule E	(Form 990 or 990-EZ) (2014) <b>SCHOOL</b>	<u> 36-4167962</u>	Page 2
Part II	(Form 990 or 990-EZ) (2014) SCHOOL  Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and	7 as applicable	
	Also and the state of the state	7, as applicable	
	Also provide any other additional information		
•	•		
_		<del></del>	
<del></del>			
	· · · · · · · · · · · · · · · · · · ·		
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### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

Open to Public OMB No 1545-0047 2014 Inspection

Interna	Internal Revenue Service		Information	▶ Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.	(Form 990) and its	s instructions is a	t www.irs.gov/form99	0.		Inspection
Nam	Name of the organization	ROCHELLE	ZELL JEWISH	зн нісн					Employer ide	Employer identification number
		SCHOOL							E	36-4167962
Part	-	General Information on Grants and Assistance	nd Assistance							
-	Does the organizat	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	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	istance, and the select		[
	criteria used to aw	criteria used to award the grants or assistance?	stance?						*	X Yes No
7	Describe in Part IV	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	oring the use of grant	funds in the United	d States				
Ра	Part II Grants and	Grants and Other Assistance to Domestic Organizations and	Domestic Organi:	zations and Domestic	c Governments. C	complete if the orga	anization answered "Y	Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any מות המתקלומים המתחסים המתחסים	IV, line 21, for	any
	recipient tria	recipient that received more than \$5,000 Part II can be duplicated II additional space is needed	So, uno Part II can	be ouplicated II addit	Orial space is rieer	ner	(f) Mathod of			
	1 (a) Name and address of organization or government	ress of organization rnment	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance		(h) Purpose of grant or assistance
0	Enter total number	Enter total number of section 501(c)(3) and government organizations l	and government or	ganizations listed in th	sted in the line 1 table				<b>A</b> 4	
က	-1	Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table						
Η		For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructi	ions for Form 990.					Schedule	Schedule I (Form 990) (2014)

SCHOOL

Schedule I (Form 990) (2014)

Part III

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. APPLICATION RUN BY FACTS. THE TUITION ASSISTANCE COMMITTEE THEN REVIEWS COPIES OF THEIR FEDERAL W-2 FORMS AS WELL AS THEIR MOST RECENT FEDERAL PARENTS REQUESTING FINANCIAL ASSISTANCE FOR THEIR CHILDREN MUST SEND LETTER THAT CONFIRMS THEIR FINANCIAL SITUATION, THROUGH A WEBSITE INCOME TAX RETURNS, ALONG WITH ANY OTHER INFORMATION, INCLUDING A (d) Amount of non-cash assistance o 1,248,900 (c) Amount of cash grant ALL INFORMATION IN DETERMINING SCHOLARSHIPS. 90 (b) Number of recipients (a) Type of grant or assistance SCHEDULE I, PART IV SCHOLARSHIPS

Schedule I (Form 990) (2014)

### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990 ROCHELLE ZELL JEWISH HIGH SCHOOL

Employer identification number

Schedule J (Form 990) 2014

36-4167962

Pá	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	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.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on 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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
			<u> </u>	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			1
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			1
	establish compensation of the CEO/Executive Director, but explain in Part III			
	X Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	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		Ì	
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
_	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	· <u>··</u>		
	,			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	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.			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	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			
а	The organization?	6a		х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			ĺ
	not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	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	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		ĺ

432111 10-13-14

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

Page 2

SCHOOL Schedule J (Form 990) 2014 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

		(B) Breakdown of	(B) Breakdown of W:2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
				L	other deferred		(B)(n-(D)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			9 =
(1) ANTHONY FRANK	[8	216.971.	0	0	16.700.	23.980.	257.651.	0
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Schedule J (Form 990) 2014

## ROCHELLE ZELL JEWISH HIGH SCHOOL

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. 36-4167962 Part III Supplemental Information Schedule J (Form 990) 2014

Page 3

Schedule K (Form 990) 2014 (i) Pooled financing Yes No × **Employer identification number** OMB No 1545-0047 Open to Public ŝ ŝ Inspection (g) Defeased (h) On behalf 36-4167962 ž of issuer ۵ Yes Yes × Yes ž × Yes ŝ ŝ EXCHANGE OF BONDS ISSUED 5/18/06 F (f) Description of purpose O ပ ► Attach to Form 990. ► Information about Schedule K (Form 990) and its instructions is at www.lrs.gov/form990 Yes Yes ▼ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. (F) CONTINUATIONS ŝ ŝ 8 Supplemental Information on Tax-Exempt Bonds Yes Yes 14333587 (e) Issue price 2,480,410. 12,303,000 × × ŝ ٥ 2011 FOR COLUMNS (A) AND (d) Date issued ⋖ 10/19/11 Yes × Yes 40 × × 36-6005842244415KL8 432121 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of ROCHELLE ZELL JEWISH HIGH Was the organization a partner in a partnership, or a member of an LLC, SEE PART VI (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? Working capital expenditures from proceeds A LAKE AND COOK COUNTIES VILLAGE OF DEERFIELD, Capital expenditures from proceeds SCHOOL Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds (a) Issuer name Part III Private Business Use Other unspent proceeds bond-financed property? Amount of bonds retired Total proceeds of issue Other spent proceeds Name of the organization **Bond Issues** Department of the Treasury Internal Revenue Service Proceeds SCHEDULEK (Form 990) Part II Part 1 က 4 15 N ß 9 8 ပ Δ 4 ဖ 8 6 우 = 2 5 17

ROCHELLE ZELL JEWISH HIGH

Page 2

36-4167962

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Schedule K (Form 990) 2014

Schedule K (Form 990) 2014 % ŝ ŝ ۵ Yes Yes % % % % ŝ ŝ Yes Yes % % % % ŝ ŝ Ω 8 Yes Yes % % % % 윈서 2 × × × × × × × × × Yes Yes × c Are there any research agreements that may result in private business use of bond-financed property? counsel to review any management or service contracts relating to the financed property? b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside governmental person other than a 501(c)(3) organization since the bonds were issued? Enter the percentage of financed property used in a private business use as a result of b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed 8a Has there been a sale or disposition of any of the bond-financed property to a nonc If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government bonds of the issue are remediated in accordance with the requirements under counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another If "Yes" to line 2c, provide in Part VI the date the rebate computation was 3a Are there any management or service contracts that may result in private Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and 4a Has the organization or the governmental issuer entered into a qualified 7 Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1.141-12 and 1.145-2? business use of bond-financed property? Part III Private Business Use (Continued) If "No" to line 1, did the following apply? 3 is the bond issue a variable rate issue? hedge with respect to the bond issue? Penalty in Lieu of Arbitrage Rebate? d Was the hedge superintegrated? e Was the hedge terminated?

10-15-14 1.141-12 and 1.145-27 Total of lines 4 and 5 a Rebate not due yet? b Exception to rebate? b Name of provider c No rebate due? Part IV Arbitrage c Term of hedge performed ဖ 4 2 o

ROCHELLE ZELL JEWISH HIGH

36 - 4167962

SCHOOL

Page 2 % % ŝ ŝ ۵ Yes Yes % % % % ŝ ŝ Yes Yes % % % % ŝ ŝ œ œ Yes Yes % % % % 윈서 ₽× × × × × × × × × Yes Yes × counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property? b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside Enter the percentage of financed property used in a private business use as a result of governmental person other than a 501(c)(3) organization since the bonds were issued? b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed 8a Has there been a sale or disposition of any of the bond-financed property to a nonc If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government bonds of the issue are remediated in accordance with the requirements under counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another Are there any management or service contracts that may result in private If "Yes" to line 2c, provide in Part VI the date the rebate computation was Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and 4a Has the organization or the governmental issuer entered into a qualified Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1 141-12 and 1 145-22 business use of bond-financed property? If "No" to line 1, did the following apply? Part III Private Business Use (Continued) 3 Is the bond issue a variable rate issue? hedge with respect to the bond issue? Penalty in Lieu of Arbitrage Rebate? d Was the hedge superintegrated? e Was the hedge terminated? Schedule K (Form 990) 2014 1 141-12 and 1.145-2? Total of lines 4 and 5 **b** Exception to rebate? a Rebate not due yet? b Name of provider c No rebate due? Part IV Arbitrage c Term of hedge performed 4 6 S ဖ

Schedule K (Form 990) 2014

ROCHELLE ZELL JEWISH HIGH SCHOOL

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Schedule K (Form 990) 2014

Part IV Arbitrage (Continued)								
	<b>∀</b> ;	:	;		)   		α ;	
5a Were gross proceeds invested in a quaranteed investment contract (GIC)?	× kes	OZ.	res	2	s a L	20	S	20
b Name of provider	AIG							
c Term of GIC	ч	.8000008						
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X							
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of		×						
Doct V Drocodings To Undertate Corrective Action		•						
	4		8		0			
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary	_							
ciosnig agreement program il servemediation is not avaliable dinuel applicable regulations?		×						
Part VI Supplemental Information. Provide additional Information for responses to questions on Schedule K (see instructions)	s on Schedule	K (see instru	ctions).					
SCHEDULE K, PART I, BOND ISSUES:								
NAME: VILLAGE OF DEERFIELD, LAKE AND	COOK CO	COUNTIES,	, ILLINOIS	SION				
DESCRIPTION OF PURPOSE:								
EXCHANGE OF BONDS ISSUED 5/18/06 FOR PURCHASE OF	LAND &	CONSTR	OF	SCHOOL				
SCHEDIII B V DADM IV APRIMBACE LINE 2C.								
NAME: VILLAGE OF DERRFIELD. LAKE AND	COOK CO	COUNTIES	TLLINOIS	SION				
DATE THE REBATE COMPUTATION WAS PERFORMED:		13						
		0						
		:						
432 123 10-15-14	7					Sch	edule K (For	Schedule K (Form 990) 2014

36-4167962

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Schedule K (Form 990) 2014

Part IV Arbitrage (Continued)		-						
	<b>∀</b>	_	B		S			۵
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	×							,
b Name of provider	AIG							
c Term of GIC	1.8000000	0000						
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	×							
6 Were any gross proceeds invested beyond an available temporary period?		×						
7 Has the organization established written procedures to monitor the requirements of		<b>&gt;</b>						
힜	_	<						
Part V Procedures To Undertake Corrective Action								
	A		8		S			D
	Yes	N <sub>O</sub>	Yes	S <sub>N</sub>	Yes	No	Yes	S.
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation is not available under applicable								_
regulations?		×						
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions)	s on Schedule K (s	see instruc	tions)					
SCHEDULE K. PART I. BOND ISSUES:								
LAGE OF DEERFIELD. LAKE AND	COOK COUN	COUNTIES	ILLINOIS	SIO				
DESCRIPTION OF PURPOSE:	1							
124	LAND & C	ONSTR	OF SC	HOOL				
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
ER NAME: VILLAGE OF DEERFIELD, LAKE AND	COOK COUN	COUNTIES,	ILLINOIS	SIO				
- 1	11/08/2013							
Í								
		:						
				į				

Schedule K (Form 990) 2014

## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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. **Employer identification number** 

ROCHELLE ZELL JEWISH HIGH SCHOOL

36-4167962

**Types of Property** Part I (a) (b) (d) (c) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 2 Art · Historical treasures 3 Art · Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 8 intellectual property X 368,498. FAIR MARKET VALUE Securities - Publicly traded 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 Food inventory 19 20 Drugs and medical supplies Taxidermy 21 22 Historical artifacts Scientific specimens 23 24 Archeological artifacts 25 Other 26 Other 27 Other Other 28 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 29 Yes No 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 Х exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) (2014)

33

describe in Part II

Schedule M (Form 990) (2014)

432142 08-12-14

## **SCHEDULE 0**

(Form 990 or 990-EZ)

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.

Open to Public

Department of the Treasury Internal Revenue Service ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

Inspection Employer identification number

Name of the organization

ROCHELLE ZELL JEWISH HIGH

1167062

SCHOOL	30-410/902
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	SION:
GRADES NINE THROUGH TWELVE.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE GOVERNING BODY WAS PROVIDED WITH THE RETURN AND THE D	IRECTOR OF FINANCE
AND TREASURER REVIEWED IT BEFORE FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
BOARD MEMBERS ARE ASKED TO RECUSE THEMSELVES FROM MEETINGS	S IF THEY HAVE A
CONFLICT WITH ITEMS ON THE MEETING AGENDA.	····
FORM 990, PART VI, SECTION B, LINE 15A:	· · · · · · · · · · · · · · · · · · ·
A COMPENSATION COMMITTEE LOOKS AT MARKET TRENDS AND QUALIF	FICATIONS WHEN
DETERMINING COMPENSATION FOR THE HEAD OF SCHOOL POSITION.	THIS CONTRACT IS
THEN APPROVED BY THE EXECUTIVE COMMITTEE AND THE BOARD.	THE HEAD OF SCHOOL
THEN HIRES ALL OTHER EMPLOYEES.	
FORM 990, PART VI, SECTION C, LINE 19:	
THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

ZELL JEWISH HIGH

ROCHELLE SCHOOL

Name of the organization

Open to Public Inspection 2014

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. **Employer identification number** 36-4167962

Schedule R (Form 990) 2014 (g) Section 512(b)(13) ŝ controlled entity? Direct controlling Yes × entity 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 Direct controlling End-of-year assets **e** status (if section Public charity 501(c)(3)) 509(A)(3) Total income Exempt Code € section 501(C)(3) Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) ILLINOIS TO ACCEPT GIFTS IN SUPPORT OF ROCHELLE ZELL JEWISH Primary activity Primary activity 9 HIGH SCHOOL ROCHELLE ZELL JEWISH HIGH SCHOOL ENDOWMENT FUND - 20-3088136, 1095 LAKE COOK ROAD Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity DEERFIELD, IL 60015 Partl Part II

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

432161 08-14-14 LHA

ROCHELLE ZELL JEWISH HIGH

SCHOOL

Schedule R (Form 990) 2014

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

Page 2

36-4167962

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity		(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income		Share of branch of year assets	(h) Disproportionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing DX managing Jile partner?	al or Perc	(i) (k) General or Percentage managing ownership partner?
												_	
		_											
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organizations streated as a corporation or trust during the tax year  (a)  (b)  (c)  (d)  (d)  (e)  (d)  (d)  (e)  (f)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (h)  (g)  (g	ganizations Taxable arporation or trust during the same same same same same same same sam	is a Corporg the tax y	corporation or Trust Cottax year (b) Primary activity	(c) (c) (state or foreign country)	(d)  Direct controlling entity	l answered "	ered "Yes" on Forr  (e)  Type of entity (C corp, S corp, or trust)	n 990, Part IV, I (f) Share of total income	IV, line 34	(g) Share of end-of-year assets	d one or more (h) Percentage ownership	Second Control of the second Sec	(i) Section Saction Controlled entity?
							-	į				8	·
432162 08-14-14				47						Sched	Schedule R (Form 990) 2014	orm 990	) 2014

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				>	Yes	ę
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?	s with one or more re	lated organizations listed	ın Parts II-IV?		+	1
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				19	7	×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	_	×
c Gift, grant, or capital contribution from related organization(s)				10	X	
d Loans or loan guarantees to or for related organization(s)				10	_	×
				<u>1</u> е		×
f Dividends from related organization(s)				<b>=</b>	7	×
g Sale of assets to related organization(s)				1g	_	×
h Purchase of assets from related organization(s)				ŧ	_	×
i Exchange of assets with related organization(s)				1i	_	×
j Lease of facilities, equipment, or other assets to related organization(s)				1j	7	×
k Tease of facilities, equipment, or other assets from related organization(s)				<b>*</b>		×
Performance of services or membership or fundraising solicitations for	nization(s)			╁	×	
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			╁	$\vdash$	×
Sharing of facilities, equipment, mailing lists, or other assets with relate	on(s)			-	×	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				10	_	×
<ul> <li>Reimbursement paid to related organization(s) for expenses</li> </ul>				9	7	×
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)				18		×
2 If the answer to any of the above is "Yes," see the instructions for information on when	ho must complete th	is line, including covered	mation 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	olved		
ROCHELLE ZELL JEWISH HIGH SCHOOL ENDOWMENT	ບ	1.690.904.	.690.904.CASH RECEIVED			
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(6)					ŀ	
(4)				i		-
(5)						
(6)						
432163 08-14-14	48		Schedule R (Form 990) 2014	(Form 9	90) 20	14

Page 4

# ROCHELLE ZELL JEWISH HIGH

SCHOOL 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

1			,			*	•		•		1		4							
(k) Percentage ownership															!					
al or	2			 				Г												
(j) lenera nanag	Yes No																			
(h) (i) (j) (k)  Dispripor- Dispr	(Form 1065)											,								
por- te ons?	2																			
(h) Disproprionate	Yes No														 $\dashv$		-			
- Fe	-														$\dashv$			-		
(g) Share of end-of-year	assets																			
(f) Share of total	ıncome																		•	
(e) Are all 6 partners sec 501(c)(3)	2							İ		 						_				
Are: Are: 501(c	Yes No																			
(d) Predominant incom (related, unrelated,	sections 512-514)																			
) micile foreign	country)																			
(b) Primary activity																				
(a) (b) (c) Name, address, and EIN Primary activity (state or of entity														:						

Schedule R (Form 990) 2014



Support for name Change

# OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

**DECEMBER 18, 2015** 

5947-217-8

C T CORPORATION SYSTEM 118 W EDWARDS ST STE 200 SPRINGFIELD IL 62704

RE ROCHELLE ZELL JEWISH HIGH SCHOOL

**DEAR SIR OR MADAM:** 

ENCLOSED YOU WILL FIND THE ARTICLES OF AMENDMENT FOR THE ABOVE NAMED CORPORATION.

FEES IN THIS CONNECTION HAVE BEEN RECEIVED AND CREDITED.

SINCERELY.

JESSE WHITE
SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
CORPORATION DIVISION
TELEPHONE (217) 782-6961

FORM NFP 110.30 (rev. Dec. 2003) ARTICLES OF AMENDMENT General Not For Profit Corporation Act

Secretary of State
Department of Business Services
501 S. Second St., Rm., 350
Springfield, IL 62756
217-782-1832 www.cyberdriveil@nois.com

FILED

DEC 1 8 2015

JESSE WHITE

	/
File # 5947-217-8	. Filing Fee; \$25 Approved:
Type or Print clearly in black ink	Do not write above this line
n back.): Chicagoland Conservati	ive Jawish High School Foundation
ent: Articles of Incorporation was adopted on  ):	November 18, 2015 In the manne
rity of the directors in office, at a meeting of on back.)	the board of directors, in accordance with
all the directors in office, in compliance with	Sections 110.15 and 108.45. (See Note 3
members enlitted to vote by the affirmative les necessary to adopt such amendment, n accordance with Section 110.20. (See Not	as provided by this Act the Articles of
members entitled to vote having not less that a provided by this Acr, the Articles of Incorp (See Note 5 on back.)	o the minimum number of votes necessar.
s a name change, insert the new corporate one of the Corporation is:	name below. Use 3(b.) below for all other
Rochelle Zell Jewish High School	7
New Name	10
	Type or Print clearly in black ink ———  In back.): Chicagoland Conservation:  Articles of incorporation was adopted on —  ity of the directors in office, at a meeting of on back.)  all the directors in office, in compliance with members entitled to vote by the affirmative as necessary to adopt such amendment, a accordance with Section 110.20. (See Nomembers entitled to vote having not less that a provided by this Acr, the Articles of Incorpicate Note 5 on back.)  Is a name change, insert the new corporate me of the Corporation is:

 The undersigned Corporation has caused these Articles to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

# All signatures must be in BLACK INK.

	Dated December 16  Morth Pay  Any Authorized Officer's Signature  Lynn Schrayer, President  Name and Title (type or print)	2015 Year	Chicagoland Conservative Jewish High School Foundation Exact Name of Corporation
5.	If there are no duly authorized officers, the personame and title.	sons desi	igneted under Section 101.10(b)(2) must sign below and print
	The undersigned affirms, under penalties of per	rjury, that	t the facts stated herein are true.
	Dated,		
	Month Day	Year	•
_	Signature		Name and Title (print)
_			
	Signature		Name and Title (print)
_	Signature		Name and Title (print)
_	Signature		
	Signature .		Name and Title (print)

### NOTES

- State the true and exact corporate name as it appears on the records of the Secretary of State BEFORE any amendment herein is reported.
- Directors may adopt amendments without member approval only when the corporation has no members, or no members entitled to yote pursuant to §110.15.
- 3. Director approval may be:
  - a. by vote at a director's meeting (either annual or special), or
  - b. by consent, in writing, without a meeting.
- 4. All amendments not adopted under Sec. 110.15 require that:
  - a. the board of directors adopt a resolution setting forth the proposed amendment, and
  - b. the members approve the amendment.

Member approval may be:

- a. by vote at a members meeting (either annual or special), or
- b. by consent, in writing, without a meeting.

To be adopted, the amendment must receive the affirmative vote or consent of the holders of at least two-thirds of the outstanding members entitled to vote on the amendment (but if class voting applies, also at least a two-thirds vote within each class is required).

The Articles of incorporation may supersede the two-thirds vote requirement by specifying any smaller or larger vote requirement not less than a majority of the outstanding votes of such members entitled to vote, and not less than a majority within each class when class voting applies. (Sec. 110.20)

5. When member approval is by written consent, all mambers must be given notice of the proposed amendment at least five days before the consent is signed. If the amendment is adopted, members who have not signed the consent must be promptly notified of the passage of the amendment. (Sec. 107.10 & 110.20)