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DLN: 93493194009476

# Form **990**

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 201		ndar year, or tax year beginning (	09-01-2014 , and ending 08-31-20	)15			
	eck if appli	cable	C Name of organization FOUNDATION FOR JEWISH DAY SCHOOL	DLS OF		D Empl	oyer iden	tification number
	tress chang		GREATER PHILADELPHIA			23-3	087655	
	me change :ial return	•	Doing business as NA			E Talanh		
Fineretic	al urn/termina	ated	Number and street (or P O box if mail 2100 ARCH STREET	I is not delivered to street address) Room,	'suite	·	one numb ) 832-05	
	ended retu		City or town, state or province, countr PHILADELPHIA, PA 19103	y, and ZIP or foreign postal code		<b>G</b> Gross	receipts \$	5,811,605
I App	olication pe	ending			_		•	<u> </u>
			F Name and address of princi ELLIOT HOLTZ 2100 ARCH STREET	ıpal officer	H(a)	Is this a group subordinates?		for ┌ Yes ┌ No
			PHILADELPHIA, PA 19103		Н(b)	Are all subord	ınates	┌ Yes ┌ No
Ta	x-exempt	status	▼ 501(c)(3)	sert no ) 4947(a)(1) or 527			halıst (	see instructions)
J W	ebsite: Þ	- WW	N JEWISHPHILLY ORG/EITC		H(c)	Group exemp	tıon num	ber ►
<b>K</b> Forr	n of organ	ızatıon	Corporation Trust Association	Other ►		ar of formation 2	001 <b>M</b> S	State of legal domicile PA
Pa	rt I	Sumi	nary		İ			
es & Governance	AN FEI SC GR	D SEC DERA <sup>-</sup> HOLA EATE	URING THE FUTURE OF THE JE TION OF GREATER PHILADELPH RSHIP AWARDS TO ELIGIBLE S R PHILADELPHIA AREA	OMOTING AND STRENGTHENING WISH COMMUNITY THE FOUND. HIA, LOCAL JEWISH DAY SCHOO TUDENTS AT JEWISH DAY SCHO	ATION - : LS AND F OOLS AND	IN COLLABOR PRE-SCHOOLS PRE-SCHOO	ATION V 5 - SHAL LS PRIM	WITH THE JEWISH L PROVIDE 1ARILY IN THE
Activities &	3 N	mbor o	f voting members of the government	g body (Part VI, line 1a)			3	13
₽CI				the governing body (Part VI, line 1			4	12
				lendar year 2014 (Part V, line 2a)	•		5	0
	<b>6</b> Tot	tal nun	nber of volunteers (estimate if neo	cessary)			6	13
	<b>7a</b> Tot			t VIII, column (C), line 12			7a	0
	1						-	
	<b>b</b> Net	t unrel	ated business taxable income fro	m Form 990-T, line 34			7b	0
						Prior Year		Current Year
	<b>8</b> C	Contrib	utions and grants (Part VIII, line	1h)			,556	
yenne	<b>8</b> C <b>9</b> P	Contrib Prograi	utions and grants (Part VIII, line n service revenue (Part VIII, line	:1h)		Prior Year 4,707	,556	<b>Current Year</b> 5,809,921 0
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_	8 C 9 P 10 I 11 C 12 T 1 13 G 14 B 15 S 5	Contrib Program Investi Other in Cotal ric 12) . Grants Benefit Salarie 5-10) Profess	nutions and grants (Part VIII, line m service revenue (Part VIII, line ment income (Part VIII, column (A), line evenue (Part VIII, column (A), line evenue—add lines 8 through 11 (revenue—add	2 1h)		<b>Prior Year</b> 4,707 5 4,713	,556 0,993 0 0,549 ,027 0	Current Year 5,809,921 0 1,684 0 5,811,605 5,267,728 0
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Sign Paragraph P	8	Contriber of Cotal and Cot	nutions and grants (Part VIII, line in service revenue (Part VIII, line in service revenue (Part VIII, column (A), line evenue (Part VIII, column (A), line evenue—add lines 8 through 11 (rown and similar amounts paid (Part IX) is paid to or for members (Part IX) is, other compensation, employee sional fundraising fees (Part IX, column (D), expenses (Part IX, column (D), expenses (Part IX, column (A), line in the less expenses Subtract line 18 is sets (Part X, line 16)	2g)	ine  Beg	### A 141  4,713  4,713  4,713  4,282  141  4,423  290  ginning of Currey Year  1,619  1,619  hedules and st er) is based or  2016-07-12  Date	,556 0 ,993 0 ,549 ,027 0 0 0 ,227 ,254 ,295 ent ,536 0	Current Year  5,809,921  0 1,684  0 5,811,605 5,267,728  0 0 176,298 5,444,026 367,579  End of Year  1,987,860 0 s, and to the best of mation of which
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BLUE BELL, PA 19422

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

✓ Yes ☐ No

OHI	1990 (2014)					Page
Par		ement of Program Servi k If Schedule O contains a resp			:III	ج
1	Briefly desc	cribe the organization's mission				
REC	ERATION OF OGNIZED 50	ON FOR JEWISH DAY SCHOOL GREATER PHILADELPHIA IN D1(C)(3) NON-PROFIT ORGAN DED OPPORTUNITY TO SUPP	PARTNERSH IZATION, WH	IIP WITH THE REGIO HOSE MISSION IS T	NAL JEWISH DAY SCHOOL O PROVIDE NEEDS-BASED	LS, IS AN IRS- O SCHOOL SCHOLARSHIP
2		anızatıon undertake any sıgnıfıca	ınt program s	ervices during the yea	ar which were not listed on	
	·	rm 990 or 990-EZ? scribe these new services on So	hedule O			
3	Did the orga	anızatıon cease conductıng, or m	nake significa	nt changes in how it c	onducts, any program · · · · · · ·	
	If "Yes," de	scribe these changes on Schedi	ıle O			
4	expenses S	e organization's program service Section 501(c)(3) and 501(c)(4 penses, and revenue, if any, for	) organızatıon	s are required to repo		
4a	(Code	) (Expenses \$	2,129,183	ıncludıng grants of \$	2,129,183 ) (Revenue \$	)
		TION AWARDED \$2,129,183 IN NEEDS- IED FOR THE EDUCATION IMPROVEMEN				DERATE-INCOME HOUSEHOLDS
4b	(Code	) (Expenses \$	478,381	ıncludıng grants of \$	478,381 ) (Revenue \$	)
	ATTEND PRE-	TION AWARDED \$478,381 IN NEEDS-B -SCHOOLS THAT FOSTER JEWISH IDEN PROGRAM OF THE COMMONWEALTH O	TITY IN THE GRE	ATER PHILADELPHIA AREA		
4c	(Code	) (Expenses \$	2,660,164	ıncludıng grants of \$	2,660,164 ) (Revenue \$	)
	THE 15% PO	TION AWARDED \$2,276,205 IN NEEDS- OREST PERFORMING SCHOOLS IN THE THE COMMONWEALTH OF PENNSYLVA	COMMONWEALT	'H OF PENNSYLVANIA AS AI	LOWED UNDER THE OPPORTUNITY	SCHOLARSHIP TAX CREDIT
4d	Other prog	jram services (Describe in Sche	dule O )			
	(Expenses	\$ inclu	ıdıng grants o	of\$	) (Revenue \$	)

## Part IV Checklist of Required Schedules

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part		1	
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		厂_
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   0		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable  1b 0	-		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		No
	were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?	7b		110
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	$\vdash$		
d	file Form 8282?	7c		Νo
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	4		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand	<u> </u>	ļ	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O	O contains a response or note to any line in this Part VI	. ~
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Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		Νο
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
		8b		No
	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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a 10b		No
b			Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Exetion C. Disclosure	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No

▶JEROME P NACHLIS CFO & CAO - JFGP

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interest policy, and financial 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

## <u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ♦ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot	not box h ar	chec k, unle n offic- rustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	from the organization and related organizations
(1) ELLIOT HOLTZ	8 00	х		×				0	0	0
CHAIRMAN		<						ŭ	O	
(2) RACHEL A GROSS ESQ MEMBER / SECRETARY	0 30 45 00	x		х				0	156,325	15,038
(3) RABBI GARY CHARLESTEIN	0 30								_	_
MEMBER	2 00	Х						0	0	0
(4) HOLLY COHEN MEMBER	0 30	х						0	0	0
(5) JOE GLASSMAN	0 30									
MEMBER		Х						0	0	0
(6) DAVID GOLD MEMBER	0 30	Х						0	0	0
(7) STANLEY GOLDIS MEMBER	8 00	Х						0	0	0
(8) AMIR GOLDMAN MEMBER	0 30	Х						0	0	0
(9) HOWARD HERZBERG	0 30	х						0	0	0
MEMBER										
(10) MICHELE LEVIN MEMBER	0 30	х						0	0	0
(11) DR ELLIOT NORRY	0 30	Х						0	0	0
MEMBER		^						0	U	U
(12) EVAN SEGAL MEMBER	0 30	х						0	0	0
(13) MOSES VEGH	0 30									
MEMBER	2 00	Х						0	0	0

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

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

1b	Sub-Total	۲			
C	Total from continuation sheets to Part VII, Section A	-			
d	Total (add lines 1b and 1c)	•	0	156,325	15,038

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

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

#### **Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
	·	'

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶0

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII  Check if Schedule O contains a response or note to any line in this Part VIII  (A) Total revenue  Statement of Revenue  (B) Relate exer funct reve   1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above  g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	(C) (D) ed or Unrelated Revenue mpt business excluded from tion revenue tax under
(A) (B) Total revenue Relate exer funct reve	(C) (D) ed or Unrelated Revenue mpt business excluded from tion revenue tax under nue sections
the state of the similar amounts not included above  1a Federated campaigns 1a	
b Membership dues 1b  c Fundraising events 1c  d Related organizations 1d  e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above	
c Fundraising events 1c  y	
d Related organizations 1d  e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above	
e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above	
f All other contributions, gifts, grants, and similar amounts not included above	
f All other contributions, gifts, grants, and 1f 5,809,921 similar amounts not included above	
₹₽₽  ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	
S Noncash contributions included in lines  1a-1f \$  92,164	
h Total. Add lines 1a-1f	
Business Code	
를 <b>2a</b>	
<u>в</u> в	
\$ C	
£ d	
e	
Dusiliess Code  b  c  d  f All other program service revenue	
g Total. Add lines 2a-2f	
3 Investment income (including dividends, interest,	1,684
and other similar amounts)	<u> </u>
<b>5</b> Royalties	
(i) Real (ii) Personal	
<b>6a</b> Gross rents	
<b>b</b> Less rental expenses	
c Rental income or (loss)	
d Net rental income or (loss)	
(ı) Securities (ıı) Other	
7a 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)	
8a Gross income from fundraising events (not including	
events (not including  \$	
See Part IV, line 18	
b Less direct expenses b	
c Net income or (loss) from fundraising events	
9a Gross income from gaming activities See Part IV, line 19	
a a	
<b>b</b> Less direct expenses <b>b</b>	
c Net income or (loss) from gaming activities	
10a Gross sales of inventory, less returns and allowances .	
a	
b Less cost of goods sold b c Net income or (loss) from sales of inventory	
Miscellaneous Revenue Business Code	
11a	
b	g dividends, interest,
с	
d All other revenue	
e Total. Add lines 11a-11d	
12 Total revenue. See Instructions	0 0 1 694

_					1 age <b>10</b>
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	Lothor organizati	ions must somn	loto column (A.)	
section					
	Check if Schedule O contains a response or note to any line in this		 (B)	(c)	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,267,728	5,267,728		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				_
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				-
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				_
10	Payroll taxes				_
11	Fees for services (non-employees)				
а	Management	163,312		163,312	
b	Legal	1,000		1,000	
c	Accounting	8,487		8,487	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,249		2,249	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	STATE REGISTRATION	1,250		1,250	
ь		,		,	
c					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,444,026	5,267,728	176,298	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	3,111,020	5,251,120	1,0,230	

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		•	
			Beginning of year		End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	1,611,036	2	1,987,860
Assets	3	Pledges and grants receivable, net	8,500	3	
	4	Accounts receivable, net		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 contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation	1	10c	
	11	Investments—publicly traded securities		11	
	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			15	
		Other assets See Part IV, line 11	1,619,536		1,987,860
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	8,742	17	9,487
			0,742	18	9,407
	18	Grants payable			
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
<u>ē</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabiliti	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>.</u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	1,610,794	25	1,978,373
	26	Total liabilities. Add lines 17 through 25	1,619,536	26	1,987,860
	20	Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete	1,010,000		1,001,000
φ Φ		lines 27 through 29, and lines 33 and 34.			
5	27	Unrestricted net assets		27	
<u>~</u> 60	28	Temporarily restricted net assets		28	
=	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
0	30	Capital stock or trust principal, or current funds		30	
Ř.	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	0	33	0
ž	34	Total liabilities and net assets/fund balances	1,619,536		1.987.860

Dar	rt XI Reconcilliation of Net Assets				-9
r er	Check if Schedule O contains a response or note to any line in this Part XI				<del>.</del>
1	Total revenue (must equal Part VIII, column (A), line 12)	.   1		5,8	311,605
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		5,4	144,026
3	Revenue less expenses Subtract line 2 from line 1	. 3		3	367,579
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			95,878
7	Investment expenses	7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- 4	163,457
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			0
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain  Schedule O	ın			
2a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled a separate basis, consolidated basis, or both	or reviewed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited o basis, consolidated basis, or both	n a separate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for audit, review, or compilation of its financial statements and selection of an independent accountan		e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, $\varepsilon$ Schedule O	explain in			
3 <b>a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set fo Single Audit Act and OMB Circular A-133?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde required audit or audits, explain why in Schedule O and describe any steps taken to undergo such		3b		

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OMB No 1545-0047

## **Public Charity Status and Public Support**

**SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		he organization	O.F.				Employer identific	ation number
		I FOR JEWISH DAY SCHOOLS ILADELPHIA	OF				23-3087655	
Pa	rt I	Reason for Publi	c Charity S	<b>Status</b> (All organiza	tions must co	mplete this p		ons.
		zation is not a private fo						21101
1	Ē	A church, convention		•	= '	•	•	
2	Ē	A school described in					/(-/(/(-/-	
3	Ĺ.	A hospital or a cooper				tion 170(b)(1)	(A)(iii).	
4	, T	A medical research or		<del>-</del>				i). Enter the
	·	hospital's name, city,	and state					<u> </u>
5	Γ	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by a	ı governmental unıt d	escribed in
		section 170(b)(1)(A)	( <b>iv).</b> (Complet	e Part II)				
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in <b>se</b>	ection 170(b)(1	)(A)(v).	
7	<u>~</u>	An organization that n	•	•	• •	om a governme	ntal unit or from the q	general public
	_	described in section 1				+ TT \		
8 9	<u>'</u>	A community trust dea  An organization that n					uitiana mamharahin	food and gross
9	,							
		receipts from activitie its support from gross						
		acquired by the organi						i busillesses
10	_	An organization organ						
11	<u>'</u>	An organization organ	•	•	·	•		out the nurneces of
	1	one or more publicly s	•	•				
		the box in lines 11a th						
а	Γ	<b>Type I.</b> A supporting of						
		supported organization				ty of the directo	ors or trustees of the	supporting
ь	Г	organization You mus Type II. A supporting				with its suppoi	ted organization(s)	by having control or
	,	management of the su						
	_	must complete Part I	•					
С	ı	Type III functionally	_		•		•	grated with, its
d	г	supported organization  Type III non-function						ranization(s) that is
-	'	not functionally integr						
	_	(see instructions) <b>Yo</b>	u must comple	te Part IV, Sections A	and D, and Pai	t V.		
е	ļ	Check this box if the o					s a Type I, Type II, T	ype III functionally
f		integrated, or Type II. Enter the number of si						
g g		Provide the following i						
9		Trovide the following r	mormation ab	out the supported orge	2461011(3)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganization	(v) A mount of	(vi) Amount of
		organization		organization	listed in your	governing	monetary support	other support (see
				(described on lines	docume	nt?	(see instructions)	instructions)
				1-9 above or IRC section (see				
				instructions))				
					Yes	No		
								+
			•	i e				i

Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total

<u> </u>			1				
Car	endar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,500,542	1,125,135	3,455,484	4,707,556	5,809,921	16,598,638
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit						
4	to the organization without charge <b>Total.</b> Add lines 1 through 3	1,500,542	1,125,135	3,455,484	4,707,556	5,809,921	16,598,638
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column	2,300,312	1,125,135	3,133,101	1,7,07,530	3,603,522	5,757,029
6	(f) <b>Public support.</b> Subtract line 5 from line 4						10,841,609
	ection B. Total Support						
	endar year (or fiscal year						
	beginning in) 🟲	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	<b>(f)</b> Total
7	A mounts from line 4	1,500,542	1,125,135	3,455,484	4,707,556	5,809,921	16,598,638
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,325	1,901	13,941	5,993	1,684	24,844
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						16,623,482
4.							
12	Gross receipts from related activiti		•			12	
13	First five years. If the Form 990 is organization, check this box and st	op here	<u> </u>		•		· —
	ection C. Computation of Pul			11 1 (5)		T T	
14	Public support percentage for 2014			11, column (f))		14	65 220 %
15	Public support percentage for 2013	•	•			15	65 570 %
16a b	33 1/3% support test—2014. If the and stop here. The organization qua 33 1/3% support test—2013. If the	alıfıes as a publıcl	y supported orga	nızatıon			<b>►</b>  ✓

b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### Part IV Supporting Organizations

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

Section A. All Supporting Organizations
---

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)$ ? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection 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  The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	За		
	b Did the organization evergice a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

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

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

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

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

## Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 Amounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
<b>a</b> From 2009			
<b>b</b> From 2010			
<b>c</b> From 2011			
d From 2012			
<b>e</b> From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount  i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2015.</b> Add lines 3j and 4c			
8 Breakdown of line 7			
<b>a</b> From 2010			
<b>b</b> From 2011			
<b>c</b> From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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#### DLN: 93493194009476

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**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 <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

emal Revenue Service	Information about Schedule D (Form	n 990) and its instructions is at <u>www.ii</u>	rs.gov/i	<u>form 990</u> .	Inspect	tion	
Name of the orga FOUNDATION FOR JI GREATER PHILADELP	WISH DAY SCHOOLS OF			loyer ident if ica	tion numbe	er	
		23-3087655 dvised Funds or Other Similar Funds or Accounts. Com					
	nizations maintaining bonor Ad nization answered "Yes" to Form 990		·unas	or Accounts	. Comple	te ii tii	
0.94		(a) Donor advised funds		(b) Funds and	other accou	ınts	
Total numbe	at end of year						
Aggregate va	lue of contributions to (during year)						
Aggregate va	lue of grants from (durıng year)						
Aggregate va	lue at end of year						
_	nization inform all donors and donor advis organization's property, subject to the o		nor advı	sed	☐ Yes	┌ No	
used only fo conferring in	nization inform all grantees, donors, and c charitable purposes and not for the bene permissible private benefit?	fit of the donor or donor advisor, or for a	any othe	r purpose	┌ Yes	┌ No	
art II Cons	<b>ervation Easements.</b> Complete r	f the organization answered "Yes"	to Forn	n 990, Part I\	/, line 7.		
Preserva Protection Preserva Complete lir	f conservation easements held by the orgon of land for public use (e g , recreation not natural habitat cion of open space es 2a through 2d if the organization held the last day of the tax year	n or education)  Preservation of a Preservation of a	certifie	d historic struc	ture		
easement of	the last day of the tax year			Held at the	End of the	Year	
a Total numbe	of conservation easements		2a				
Total acreag	e restricted by conservation easements		2b				
	nservation easements on a certified hist	oric structure included in (a)	2c				
<b>1</b> Number of c	nservation easements included in (c) ac ture listed in the National Register		2d				
Number of c	nservation easements modified, transfer	red, released, extinguished, or terminat	ed by th	ie organization	during		
the tax year	<b>-</b>						
Number of s	ates where property subject to conserva	tion easement is located 🕨					
Does the org	anization have a written policy regarding of the conservation easements it holds?	the periodic monitoring, inspection, har	ndling of	violations, and	┌ Yes	┌ No	
Staff and vol	unteer hours devoted to monitoring, inspe	ecting, and enforcing conservation ease	ments d	luring the year			
	penses incurred in monitoring, inspectin	g, and enforcing conservation easemen	ts durınç	g the year			
Does each c	onservation easement reported on line 2( .70(h)(4)(B)(ii)?	(d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	┌ Yes	┌ No	
balance she	describe how the organization reports co t, and include, if applicable, the text of th ion's accounting for conservation easem	ne footnote to the organization's financia					
	nizations Maintaining Collection plete if the organization answered "		or Otl	her Similar	Assets.		
works of art,	ation elected, as permitted under SFAS historical treasures, or other similar asside, in Part XIII, the text of the footnote	ets held for public exhibition, education	, or rese	arch in furthera			
works of art,	ation elected, as permitted under SFAS historical treasures, or other similar assi ide the following amounts relating to thes	ets held for public exhibition, education				lic	
(i) <sub>Revenue</sub>	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$			
(ii) Assets	cluded in Form 990, Part X						
If the organı	ration received or held works of art, histo punts required to be reported under SFAS						
_	uded in Form 990, Part VIII, line 1	•		<b>►</b> \$			

**b** Assets included in Form 990, Part X

Part	<b>TITLE</b> Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	<u>cal T</u>	<u>reasur</u>	<u>es, or C</u>	ther	· Simila	<u>r Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of	the follo	wing that a	are a	sıgnıfıcar	nt use of	ıts	
а	Public exhibition		d	Γ	Loan	or excha	ange progi	ams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furth	er the or	ganızatıor	's ex	empt pur	ose in		
_	Part XIII											
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	of the	organ	ızatıon's	collection	۱?			Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Fo	orm 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	ford	ontrib	utions or	other ass	ets n	ot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able		_					
										Amou	ınt	
С	Beginning balance						_	1c				
d	Additions during the year						L	1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21,	for e	scrow	orcusto	dial accou	nt lıa	bility?	$\vdash$	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XII	T Check here if the	expla	anatı	on has	been pro	ovided in I	Part >	(111			$\sqcap$
Pa	rt V Endowment Funds. Complete										<u> </u>	
		(a)Current year		<b>)</b> Prior			o years back				)Four ye	ears back
1a	Beginning of year balance											
b	Contributions											
C	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the cur	rent year end baland	e (lın	ne 1g	, colun	nn (a)) he	eld as			•		
а	Board designated or quasi-endowment <b>F</b>											
b	Permanent endowment -											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho											
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	ation	that	are hel	d and ad	ministere	d for t	the			B1-
	(i) unrelated organizations									3a(i)	Yes	No
	(ii) related organizations									3a(ii)		
ь	If "Yes" to 3a(II), are the related organization							٠. ٠		3b		
4	Describe in Part XIII the intended uses of th											
Par	t VI Land, Buildings, and Equipme		he o	rgar	ıızatıo	n answe	ered 'Yes	' to	Form 99	0, Part	IV, lıı	ne
	11a. See Form 990, Part X, line	10.					Taxo :				1415	
	Description of property					or other estment)	(b)Cost or basis (ot			ımulated cıatıon	(d) B	ook value
1a	Land			$\top$								
b	Buildings											
С	Leasehold improvements											
d	Equipment											
e	Other											
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			ımn (	B), line	10(c).)	<del></del>			<b>&gt;</b>		0

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	( <b>b)</b> Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	Complete if the organization	n answered West to Form 000. Port TV line 44-
Part VIII Investments—Program Related. ( See Form 990, Part X, line 13.	Complete if the organizatio	ii aliswered Yes to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
		0, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org	yanızatıon answered 'Yes' t	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
AMOUNTS HELD FOR FUTURE CHARITABLE		
DISTRIBUTIONS	1,978,373	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 1,978,373	
3 Labelle for an arrange of the control of the cont		

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	272,176
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-5,539,429
3	Subtract line <b>2e</b> from line <b>1</b>	3	5,811,605
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
С	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 )	5	5,811,605
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total expenses and losses per audited financial statements	1	272,176
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	l	
C	Other losses	l	
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	95,878
3	Subtract line <b>2e</b> from line <b>1</b>	3	176,298
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	l	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	l	
b	Other (Describe in Part XIII )	l	
C	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	5,267,728
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	5,444,026
Part	XIII Supplemental Information		
Part	Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to mation		de any additional
1	Return Reference Explanation		

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS PRESENTED IN THESE FINANCIAL STATEMENTS THE FOUNDATION PREVIOUSLY ADOPTED ACCOUNTING STANDARDS CODIFICATION (ASC) 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THIS INTERPRETATION CLARIFIES THE ACCOUNTING FOR INCOME TAXES BY PRESCRIBING THE MINIMUM STANDARD A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS THE FOUNDATION HAS NOT TAKEN ANY UNCERTAIN TAX POSITION THAT SHOULD BE ACCOUNTED FOR UNDER ASC 740 MANAGEMENT BELIEVES THAT THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS ENDED ON OR PRIOR TO AUGUST 31, 2011
PART XI, LINE 2D - OTHER ADJUSTMENTS	DISTRIBUTIONS SHOWN AS EXPENSES -5,267,728 CHANGE IN AMOUNT HELD FOR FUTURE CHARITABLE DISTRIBUTIONS -367,579
PART XII, LINE 4B - OTHER ADJUSTMENTS	DISTRIBUTIONS SHOWN AS EXPENSES 5,267,728
PART XII, LINE 2A	DONATED SERVICES AND USE OF FACILITIES IN-KIND CONTRIBUTIONS - FUNDRAISING COSTS FROM JEWISH FEDERATION = 57,517 IN-KIND CONTRIBUTIONS - GENERAL AND ADMINISTRATIVE COSTS FROM JEWISH FEDERATION = 38,361 TOTAL TO SCHEDULE D, PART XII, LINE 2A 95,878

Jenedale 2 (1 31111 33 3) 23 13		r age <b>3</b>		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
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Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493194009476 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 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 Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization FOUNDATION FOR JEWISH DAY SCHOOLS OF 23-3087655 GREATER PHILADELPHIA Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other) See Additional Data Table

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

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

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

Return Reference

**Explanation** 

PART I, LINE 2

THE FOUNDATION EXISTS FOR THE PURPOSE OF ASSISTING STUDENTS ATTENDING TEN JEWISH DAY SCHOOLS AND ONE SPECIAL NEEDS PROGRAM WITH TUITION ASSISTANCE BY RAISING MONEY THROUGH THE COMMONWEALTH OF PENNSYLVANIA'S EDUCATIONAL IMPROVEMENT TAX CREDIT (EITC) AND OPPORTUNITY SCHOLARSHIP TAX CREDIT (OSTC) PROGRAMS AND AWARDING K-12 SCHOLARSHIPS TO ELIGIBLE STUDENTS JEWISH DAY SCHOOLS RAYMOND AND RUTH PERELMAN JEWISH DAY SCHOOL ABRAMS HEBREW ACADEMY JACK M BARRACK HEBREW ACADEMY POLITZ HEBREW ACADEMY KOHELET YESHIVA HIGH SCHOOL TORAH ACADEMY OF GREATER PHILADELPHIA CHEDER CHABAD I S KOSLOFF TORAH ACADEMY GIRLS HIGH SCHOOL TALMUDICAL YESHIVA OF PHILADELPHIA MESIVTA HIGH SCHOOL OF GREATER PHILADELPHIA ON OCCASION ELIGIBLE STUDENTS IN ATTENDANCE AT OTHER JEWISH DAY SCHOOLS THROUGHOUT THE STATE MAY RECEIVE FUNDS FROM THE FOUNDATION IN ADDITION, THE FOUNDATION DISTRIBUTES FUNDS TO OROT, AN INITIATIVE WHICH PROVIDES SPECIAL NEEDS SERVICES TO STUDENTS IN SEVERAL OF OUR DAY SCHOOLS IN ADDITION, THE FOUNDATION PROVIDES DONOR DESIGNATED K-12 EITC TAX CREDIT SCHOLARSHIPS TO ELIGIBLE STUDENTS ENROLLED IN KINDERGARTEN PROGRAMS AT JEWISH PRE-SCHOOLS SHOULD DONORS DESIGNATE THEIR FUNDS AS SUCH THE FOUNDATION PROVIDES SIMILAR SCHOLARSHIPS THROUGH THE PRE-K EITC PROGRAM FOR ELIGIBLE STUDENTS ENROLLED IN OVER 30 LOCAL JEWISH PRE-SCHOOLS PRE-SCHOOL PROGRAMS ABRAMS HEBREW ACADEMY ADATH ISRAEL OF THE MAIN LINE CONGREGATION ADATH JESHURUN BETH ISRAEL CONGREGATION OF CHESTER COUNTY BETH SHOLOM CONGREGATION BETH TIKVAH - B'NAI JESHURUN CONGREGATION BETH SOLOMON CONGREGATION BETH OR CENTER CITY JEWISH PRE-SCHOOL CHABAD OF THE MAIN LINE CHEDER CHABAD FEDERATION EARLY LEARNING SERVICES THE GAN SCHOOL GERMANTOWN JEWISH CENTRE HAR ZION TEMPLE KAISERMAN JCC KESHER ISRAEL CONGREGATION (CHESTER COUNTY) KOL EMET PRE-SCHOOL LUBAVITCH OF MONTGOMERY COUNTY MAIN LINE REFORM TEMPLE OHEV SHALOM OF BUCKS COUNTY OLD YORK ROAD TEMPLE BETH AM CONGREGATION OR AMI REFORM CONGREGATION KENESETH ISRAEL THE CONGREGATIONS OF SHAARE SHAMAYIM SHIR AMI TEMPLE BETH HILLEL - BETH EL TEMPLE BETH SION - BETH ISRAEL TEMPLE BRITH ACHIM TEMPLE JUDEA TEMPLE SHOLOM IN BROOMALL TEMPLE SINAI TIFERET BETH ISRAEL TIFERETH ISRAEL OF LOWER BUCKS COUNTY TORAH ACADEMY OF BUCKS COUNTY TORAH ACADEMY OF GREATER PHILADELPHIA RECIPIENT ELIGIBILITY 🛭 ALL FAMILIES RECEIVING THESE SCHOLARSHIPS MUST RESIDE IN PENNSYLVANIA AND MEET SPECIFIC HOUSEHOLD INCOME GUIDELINES FOR EITC, THE AWARD MAXIMUM IS TUITION PLUS FEES OSTC HAS THE SAME HOUSEHOLD INCOME GUIDELINES, WITH TWO ADDITIONAL STIPULATIONS STUDENTS MUST RESIDE WITHIN THE CATCHMENT AREA OF ONE OF THE 15% POOREST PERFORMING SCHOOLS WITHIN THE COMMONWEALTH, AND MAXIMUM SCHOLARSHIPS OF \$8,500 FOR NON-SPECIAL EDUCATION STUDENTS AND \$15,000 FOR SPECIAL EDUCATION STUDENTS THE BASIC PROGRAM DONOR REQUIREMENTS ARE AS FOLLOWS -THE K-12 PROGRAM GIVES BUSINESSES A 75% (ONE YEAR) OR 90% (TWO YEAR) STATE TAX CREDIT TO BUSINESSES THAT MAKE CONTRIBUTIONS TO APPROVED SCHOLARSHIP ORGANIZATIONS THE MAXIMUM TAX CREDIT IS \$750,000 PER BUSINESS ENTITY PER TAX CREDIT PROGRAM YEAR FOR TWO YEARS HB 91, PASSED IN OCTOBER 2014, PROVIDES A TWO MONTH WINDOW (OCTOBER 1 - NOVEMBER 30) DURING WHICH TIME ANY TAX CREDITS REMAINING WITHIN THE OSTC PROGRAM CAN BE APPLIED TO EITC APPLICATIONS, ELIMINATING THE TAX CREDIT MAXIMUM PER ENTITY )-BEGINNING WITH FY 15, THE PRE-K PROGRAM MOVED FROM AN ANNUAL TO A TWO-YEAR RENEWAL PROGRAM PROVIDING BUSINESSES A 100% STATE TAX CREDIT FOR DONATIONS UP TO \$10,000 AND A 90% STATE TAX CREDIT FOR ADDITIONAL CONTRIBUTIONS UP TO A \$200,000 MAXIMUM -THE SCHOLARSHIP ORGANIZATION MUST USE A MINIMUM OF 80% OF THE MONIES FOR SCHOLARSHIPS TO STUDENTS -THE REMAINING 20% CAN BE USED FOR OTHER PURPOSES, INCLUDING ADMINISTRATIVE COSTS OR DISTRIBUTION OF ADDITIONAL SCHOLARSHIP AWARDS -BUSINESSES REQUEST TO PARTICIPATE IN THE PROGRAM THROUGH THE COMMONWEALTH'S DEPARTMENT OF COMMUNITY & ECONOMIC DEVELOPMENT (DCED) WEBSITE AT WWW NEWPA COM/EITC -THE DCED SENDS APPROVAL TO THE BUSINESS BASED ON AVAILABLE TAX CREDITS ALLOTTED PER THE STATE'S FISCAL YEAR (JUNE 30 YEAR-END) -THE COMMONWEALTH SETS A LIMIT ON THE AMOUNT OF CREDITS GIVEN PER YEAR -THE BUSINESS RECEIVES A LETTER FROM THE DCED APPROVING THE BUSINESS FOR THE TAX CREDIT FOR THE APPROPRIATE YEAR  $\,$  -THE BUSINESS SENDS THE CONTRIBUTION TO THE SCHOLARSHIP ORGANIZATION -THE SCHOLARSHIP ORGANIZATION SENDS A LETTER OF RECEIPT/ACKNOWLEDGEMENT TO THE BUSINESS, THE BUSINESS SENDS A COPY OF THE LETTER TO THE DCED, THE DCED INFORMS THE COMMONWEALTH'S DEPARTMENT OF REVENUE THAT THE BUSINESS HAS COMPLIED WITH THE RULES OF THE PROGRAM AND EARNED THE TAX CREDIT SOME BUSINESSES MAY ALSO BE REQUIRED TO SUBMIT A REV-1123 FORM ONCE THE MONIES ARE RECEIVED AT THE FOUNDATION, THE FOLLOWING OCCURS -CONTRIBUTIONS RECEIVED FROM BUSINESSES ARE EITHER DONOR DESIGNATED TO A SCHOOL OR REMAIN UNDESIGNATED -DONOR DESIGNATED CONTRIBUTIONS GO TO QUALIFIED STUDENTS AT THE SPECIFIED JEWISH DAY SCHOOL OR PRE-SCHOOL -UNDESIGNATED CONTRIBUTIONS CAN GO TO THE NEEDIEST ELIGIBLE STUDENTS AMONG ALL THE SCHOOLS -STUDENTS AT THE JEWISH DAY AND PRE-SCHOOLS SEND APPLICATIONS TO A THIRD-PARTY SCHOLARSHIP REVIEW VENDOR THE REVIEW VENDOR SETS TIERS BASED ON INCOME LEVEL AND FIXED SCHOLARSHIP AMOUNTS FOR STUDENTS IN EACH TIER ARE ASSIGNED BASED ON THE RECOMMENDATIONS OF THE FOUNDATION BOARD, THE FOUNDATION STAFF THEN WORKS WITH INDIVIDUAL SCHOOLS TO MAKE ADJUSTMENTS AND DETERMINE FINAL DISTRIBUTIONS OF DESIGNATED FUNDS -THE SCHOOLS RECEIVE A LIST OF STUDENTS RECEIVING SCHOLARSHIPS FROM THE FOUNDATION AND CONFIRM ENROLLMENT -ON BEHALF OF THE FOUNDATION, THE THIRD PARTY VENDOR SENDS LETTERS OF THE AWARDS TO PARENTS OF THE STUDENTS RECEIVING THEM -THE SCHOOLS RECEIVE A

CHECK -THE SCHOLARSHIPS ARE APPLIED TO REDUCE TUITION FOR THE UPCOMING SCHOOL YEAR THE FOUNDATION COMMUNICATES WITH THE SCHOOLS DURING THE SCHOOL YEAR AND ADDITIONAL FUNDS ARE DISTRIBUTED IF NEEDED AND AVAILABLE, AND FUNDS ARE REDISTRIBUTED TO OTHER QUALIFIED CANDIDATES IF A STUDENT HAS NOT ATTENDED OR HAS DROPPED OUT EARLY IN THE YEAR

### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 23-3087655

Name: FOUNDATION FOR JEWISH DAY SCHOOLS OF

GREATER PHILADELPHIA

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

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABRAMS HEBREW ACADEMY31 WEST COLLEGE AVENUE YARDLEY,PA 19067	21-6001415	501(C)(3)	280,000				EDUCATION - SCHOLARSHIPS
BETH SHOLOM SYNAGOGUE8231 OLD YORK ROAD ELKINS PARK,PA 19027	23-1360837	501(C)(3)	8,672				EDUCATION - SCHOLARSHIPS
CHABAD-LUBAVITCH OF THE MAIN LINE625 MONTGOMERY AVE MERION STATION,PA 19066	20-0072887	501(C)(3)	13,320				EDUCATION - SCHOLARSHIPS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CHEDER CHABAD OF PHILADELPHIA276 S BRYN MAWR AVE BRYN MAWR,PA 19010	27-0854753	501(C)(3)	363,265				EDUCATION - SCHOLARSHIPS	
CONGREGATION ADATH JESHURUN7763 OLD YORK ROAD ELKINS PARK,PA 19027	23-1484192	501(C)(3)	9,000				EDUCATION - SCHOLARSHIPS	
CONGREGATION BETH SOLOMON85 TOMLINSON ROAD HUNTINGDON VALLEY,PA 19006	23-2190280	501(C)(3)	15,000				EDUCATION - SCHOLARSHIPS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CONGREGATIONS OF SHAARE SHAMAYIM9768 VERREE ROAD PHILADELPHIA,PA 19115	23-6390516	501(C)(3)	25,200				EDUCATION - SCHOLARSHIPS	
FEDERATION EARLY LEARNING SERVICES10700 JAMISON AVENUE PHILADELPHIA,PA 19116	23-1352554	501(C)(3)	21,221				EDUCATION - SCHOLARSHIPS	
GAN CHABAD INC7620 CASTOR AVE PHILADELPHIA,PA 19152	45-0520270	501(C)(3)	7,200				EDUCATION - SCHOLARSHIPS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
GERMANTOWN JEWISH CENTRE400 W ELLET ST PHILADELPHIA,PA 19119	23-1396831	501(C)(3)	5,400				EDUCATION - SCHOLARSHIPS	
I S KOSLOFF TORAH ACADEMY HIGH SCHOOL FOR GIRLS50 MONTGOMERY AVENUE BALA CYNWYD,PA 19004	45-2611143	501(C)(3)	391,828				EDUCATION - SCHOLARSHIPS	
JACK M BARACK HEBREW ACADEMY272 SOUTH BRYN MAWR AVENUE BRYN MAWR,PA 19010	23-1352614	501(C)(3)	535,342				EDUCATION - SCHOLARSHIPS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
KAISERMAN JCC45 HAVERFORD RD WYNNEWOOD,PA 19096	27-0841715	501(C)(3)	10,747				EDUCATION - SCHOLARSHIPS	
KESHER ISRAEL CONGREGATION1000 POTTSTOWN PIKE WEST CHESTER,PA 19380	23-1948656	501(C)(3)	10,875				EDUCATION - SCHOLARSHIPS	
KOHELET YESHIVA HIGH SCHOOL223 N HIGHLAND AVENUE MERION STATION,PA 19066	23-2915026	501(C)(3)	360,022				EDUCATION - SCHOLARSHIPS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
LUBAVITCH OF CENTER CITY527 LOMBARD STREET PHILADELPHIA,PA 19147	22-2464029	501(C)(3)	8,760				EDUCATION - SCHOLARSHIPS	
OHEV SHALOM OF BUCKS COUNTY944 2ND ST PIKE RICHBORO,PA 18954	23-1994887	501(C)(3)	6,571				EDUCATION - SCHOLARSHIPS	
OLD YORK ROAD TEMPLE - BETH AM971 OLD YORK RD ABINGTON,PA 19001	23-1583642	501(C)(3)	8,600				EDUCATION - SCHOLARSHIPS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
OROT7601 OLD YORK RD MELROSE PARK,PA 19027	20-0803538	501(C)(3)	77,660				EDUCATION - SCHOLARSHIPS	
POLITZ HEBREW ACADEMY 9225 OLD BUSTLETON AVENUE PHILADELPHIA,PA 19115	22-2436383	501(C)(3)	1,210,812				EDUCATION - SCHOLARSHIPS	
RAYMOND AND RUTH PERELMAN JEWISH DAY SCHOOL49 HAVERFORD ROAD WYNNEWOOD,PA 19096	23-1496890	501(C)(3)	373,151				EDUCATION - SCHOLARSHIPS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
TALMUDICAL YESHIVA OF PHILADELPHIA6063 DREXEL ROAD PHILADELPHIA, PA 19131	23-1476335	501(C)(3)	136,200				EDUCATION - SCHOLARSHIPS	
TEMPLE ADATH ISRAEL OF THE MAIN250 N HIGHLAND AVE MERION STATION, PA 19066	23-1431499	501(C)(3)	14,400			1	EDUCATION - SCHOLARSHIPS	
TEMPLE BETH HILLEL1001 REMINGTON RD WYNNEWOOD,PA 19096	04-3683148	501(C)(3)	5,400			1	EDUCATION - SCHOLARSHIPS	

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
TEMPLE SHOLOM IN BROOMALL55 N CHURCH LANE BROOMALL,PA 19008	23-6050744	501(C)(3)	5,790				EDUCATION - SCHOLARSHIPS					
THE MESIVTA HIGH SCHOOL OF GREATER PHILADELPHIA 314 LEVERING MILL RD BALA CYNWYD,PA 19004	46-3823388	501(C)(3)	134,920				EDUCATION - SCHOLARSHIPS					
TORAH ACADEMY OF BUCKS COUNTY2456 BRISTOL RD BENSALEM, PA 19020	23-3060765	501(C)(3)	9,000				EDUCATION - SCHOLARSHIPS					

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
TORAH ACADEMY OF GREATER PHILADELPHIA 742 ARGYLE ROAD WYNNEWOOD,PA 19096	23-1645684	501(C)(3)	1,201,868				EDUCATION - SCHOLARSHIPS						

DLN: 93493194009476

OMB No 1545-0047

#### Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization FOUNDATION FOR JEWISH DAY SCHOOLS OF GREATER PHILADELPHIA

**Employer identification number** 

23-3087655

Questions Regarding Compensation Yes No 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 Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations 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 Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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 The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 The organization? 6a Νo Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Nο If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

### 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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		<b>(B)</b> Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 RACHEL A GROSS ESQ, MEMBER / SECRETARY	(i)	0	0	0	0	0	0	0
	(ii)	150,310	5,000	1,015	13,752	1,286	171,363	0

Schedule J (Form 990) 2014

#### Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2014

DLN: 93493194009476

OMB No 1545-0047

Open to Public Inspection

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

Department of the Treasury

**Noncash Contributions** 

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

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

Internal Revenue Service Name of the organization FOUNDATION FOR JEWISH DAY SCHOOLS OF GREATER PHILADELPHIA

**Employer identification number** 

23-3087655

Pa	rt I Types of Property				23 3007033			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	<b>(d</b> Method of d noncash contrib	etermı		ts
1	Art—Works of art			19				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
J	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	3	92,164	FMV			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
	structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ▶ ()							
	O ther ►()							
	O ther ▶()							
	Other ► ()							
29	Number of Forms 8283 received for which the organization comple				29			
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that		Yes	No
	ıt must hold for at least three ye	ars from the	e date of the initial contribu	ıtıon, and which is not requi	red to be used			
	for exempt purposes for the enti					30a		Νo
b	If "Yes," describe the arrangement							
31	Does the organization have a gif			review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell	noncash	22-	\ <sub>\ \ \</sub>	
L	If "Yes," describe in Part II					32a	1 65	
33	If the organization did not report	an amount	in column (c) for a type of	property for which column /	a) is chacked			
<i>_</i>	describe in Part II	an annoull	in column (c) for a type of	property for willcli column (	a) is checked,			

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

Explanation

Inditibet of items fee	cerved, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
	JEWISH FEDERATION IS A RELATED ORGANIZATION OF THE FOUNDATION JEWISH FEDERATION ALLOCATES CERTAIN AMOUNTS THROUGH ITS CENTER FOR JEWISH LIFE AND LEARNING TO COVER FUNDRAISING AND ADMINISTRATIVE EXPENSES THESE AMOUNTS ARE RECOGNIZED AS IN-KIND CONTRIBUTIONS AND EXPENSES OF THE FOUNDATION FUNDRAISING ACTIVITY MAY INCLUDE SOLICITATION OF NON-CASH CONTRIBUTIONS (I E PUBLICLY TRADED SECURITIES) JEWISH FEDERATION PROCESSES THE LIQUIDATION OF NON-CASH CONTRIBUTIONS AND DEPOSITS PROCEEDS INTO THE FOUNDATION ACCOUNTS

Schedule M (Form 990) (2014)

#### DLN: 93493194009476

OMB No 1545-0047

Inspection

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization FOUNDATION FOR JEWISH DAY SCHOOLS OF **Employer identification number** 

FOUNDATION FOR JEWISH DAY SCHOOLS OF GREATER PHILADELPHIA	F	23-3087655
		23-300/055
990 Schedule O, Supplemen Return Reference		
	Explanation	ANTUE COVERNING DODY
FORM 990, PART VI, SECTION A, LINE 8B	THE FOUNDATION DOES NOT HAVE COMMITTEES, OTHER TH	AN THE GOVERNING BODY
FORM 990, PART VI, SECTION B, LINE 11	EACH YEAR THE FOUNDATION FILES TAX RETURNS THAT AFFIRM SEL	
	ECTED BY THE AUDIT COMMITTEE OF JEWISH FEDERATION OF FEDERATION OF FEDERATION OF STANKING TO A MINISTER BY AN ANIMAL OF THE PROPERTY OF THE PR	·
	ON) THE TAX FIRM USES INFORMATION AUDITED BY AN INDI	
	DIT FIRMS CAN BE THE SAME OR SEPARATE FIRMS THE 990 FI RM TO THE JEWISH FEDERAION AUDIT COMMITTEE FOR REVI	
	REVIEW, IT  IS PROVIDED TO THE THE FOUNDATION BOARD OF DIRECTOR	
FORM 990, PART VI, SECTION B,	INTERNAL PROCEDURES FOR THE REVIEW OF THE FOUNDAT	
LINE 12C	STATEMENTS 1 PRIOR TO THE FIRST FOUNDATION BOARD MEETING FOR EAC FOUNDATI	CH FISCAL YEAR, A SUBSET OF THE
	ON'S GOVERNANCE COMMITTEE WILL REQUEST THAT AN ALL ETHICAL	DMINISTRATOR MAIL THE STATEMENT OF
	GUIDELINES TO ALL NEW AND RENEWING BOARD MEMBERS THE DOC	BOARD MEMBERS ARE ASKED TO READ
	UMENT, COMPLETE AND SIGN THE CONFLICT OF INTEREST STOCU	ATEMENT, AND RETURN THE COMPLETED
	MENT TO THE FOUNDATION ADMINISTRATORS OF THE FOUN MEMBERS OF	IDATION'S BUSINESS (INCLUDING
	JEWISH FEDERATION'S STAFF ARE ALSO REQUIRED TO REA THE CO	·
	NFLICT OF INTEREST STATEMENT AND RETURN THE COMPLE ONE M	
	ONTH AFTER THE CONFLICT OF INTEREST STATEMENT IS MA	·
	IS SENT A SECOND TIME TO ANY BOARD MEMBERS WHO DID	,
	LICT OF INTEREST STATEMENT 3 ALL RESPONSES ON THE COM	
	PILED AND THEN REVIEWED BY THE GOVERNANCE SUB-COM GOVERNANCE SUB -COMMITTEE ARE THE CHAIRMAN OF THE FOUNDATION, THE	
	FEDER  ATION, AND A BOARD MEMBER APPOINTED BY THE CHAIRM	
	OF THE  COMMITTEE DETERMINE ALL NEXT STEPS RELATED TO ETHIC	
	MEMB  ER OF THE COMMITTEE CONTACTS BOARD MEMBERS TO DIS	, and the second se
	PROPE  R ETHICAL RESPONSE TO THE CONFLICT THE SIGNED CONFL	
	ON  FILE AS PRESCRIBED BY THE FOUNDATION'S DOCUMENT RE	
	YEARS	
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION OF THE THE FOUNDATION OFFICERS OR KEY COMPENSATION RECEI	
	VED FROM THE RELATED ORGANIZATION THE JEWISH FEDER THAT CO	
FORM 990, PART VI, SECTION C,	MPENSATION FOLLOW THE COMPENSATION POLICIES OF JEV PUBLIC DISCLOSURE. THE FOUNDATION BELIEVES IN FULL DI	
LINE 19	THEREFORE, AT ANY TIME, ANY ONE CAN REQUEST A COPY OF FORM 990	
	FORM 10 23, GOVERNING DOCUMENTS OR CONFLICT OF INTEREST PO	LICY AND IT WILL BE PROVIDED TO THEM
	IT IS OUR POLICY TO RECEIVE THE REQUEST IN WRITING, SIGNE FOUNDATI	ED BY THE REQUESTOR, TO THE
	ON CHAIRMAN OR THE OFFICE OF THE JEWISH FEDERATION REA	CFO A COPY WILL BE RELEASED WITHIN
	SONABLE TIME BUT NOT TO EXCEED TEN BUSINESS DAYS	
FORM 990, PART XI, LINE 9	CHANGE IN AMOUNTS HELD FOR FUTURE CHARITABLE DISTRE	·
	XPENSES -57,517 IN-KIND ADMINISTRATION EXPENSES -38,3	
FORM 990, PART XII, LINE 2C	THIS PROCESS HAS NOT CHANGED FROM THE PRIOR PERIOD VI, SECTION B, LINE 11	AND IS DETAILED IN SCHEDULE O, PART

DLN: 93493194009476

2014

OMB No 1545-0047

Open to Public Inspection

# **Related Organizations and Unrelated Partnerships**

**SCHEDULE R** (Form 990)

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

Name of the organization **Employer identification number** FOUNDATION FOR JEWISH DAY SCHOOLS OF GREATER PHILADELPHIA 23-3087655

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

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co ent	ntrolled
						Yes	No
(1) JEWISH FEDERATION OF GREATER PHILADELPHIA 2100 ARCH STREET	FUNDRAISING AND GRANTMAKING	PA	501(C)(3)	7			No
PHILADELPHIA, PA 19103 23-1500085							

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h	)	(i)	(j)		(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Genera	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocat	ions?	amount in box	manag	jing	ownership
		(state or	entity	unrelated,		assets			20 of	partne	er?	
		foreign		excluded from					Schedule K-1	l		
		country)		tax under					(Form 1065)	i		
				sections 512-						i		
				514)							_	
							Yes	No		Yes	No	
									·			

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	(i) Section (b)(i contro entit	n 512 13) olled
							Yes	No
(1) JEWISH EXPONENT 2100 ARCH STREET	NEWSPAPER PUBLISHING		JEWISH FEDERATION OF GR PHILA	С				No
PHILADELPHIA, PA 19103 23-0734230			3					

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Y	es	No
1 [	During the tax year, did the orgranization engage in any of the following transactions with one or more rela	ated organizations	listed in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	,		No
b	Gift, grant, or capital contribution to related organization(s)			11:	,		No
c	Gift, grant, or capital contribution from related organization(s)			10	:		No
d	Loans or loan guarantees to or for related organization(s)			10	1		No
е	Loans or loan guarantees by related organization(s)			16		4	No
f	Dividends from related organization(s)			1f	•		No
g	Sale of assets to related organization(s)			19	,		No
h	Purchase of assets from related organization(s)			11	1		No
i	Exchange of assets with related organization(s)			1i	i		No
j	Lease of facilities, equipment, or other assets to related organization(s)			1j		耳	No
				41		$\dashv$	
	Lease of facilities, equipment, or other assets from related organization(s)			11		_	No No
	Performance of services or membership or fundraising solicitations for related organization(s)			<u> </u>	n Y		NO
	n Performance of services or membership or fundraising solicitations by related organization(s)			<u> </u>	—		N-
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			11	-		No
0	Sharing of paid employees with related organization(s)			10	}	+	No
р	Reimbursement paid to related organization(s) for expenses			15	) Y	es	
q	Reimbursement paid by related organization(s) for expenses			10	1	4	No
r	O ther transfer of cash or property to related organization(s)			1r	r Y	es	
s	Other transfer of cash or property from related organization(s)			15	•		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including	covered relationships a	nd transaction thresholds			
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	t invo	lved	

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

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

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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