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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 09-01-2014 , and ending 08-31-2015

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization MINNEAPOLIS JEWISH FEDERATION		D Employer identification number 41-0693866
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (612) 593-2600
	13100 WAYZATA BLVD NO 200		
	City or town, state or province, country, and ZIP or foreign postal code MINNETONKA, MN 55305		G Gross receipts \$ 30,793,532
F Name and address of principal officer STUART SILBERMAN 13100 WAYZATA BLVD NO 200 MINNETONKA, MN 55305			
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527		H(a) Is this a group return for subordinates? ☐ Yes ☒ No	
J Website: ▶ WWW.JEWISHMINNEAPOLIS.ORG		H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
		H(c) Group exemption number ▶	

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1930	M State of legal domicile MN
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Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities WE BUILD COMMUNITY, CARE FOR THE WELFARE OF JEWS EVERYWHERE, & MAXIMIZE PARTICIPATION IN JEWISH LIFE		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	32
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	32
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	44
	6	Total number of volunteers (estimate if necessary)	6	750
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-122,853
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-86,163
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	14,980,461	23,416,861
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,868,165	1,695,663
12		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	239,473	111,828
			21,088,099	25,224,352
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	11,241,639	10,747,985
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,539,775	2,093,798
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,293,646		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,618,088	1,423,717
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	15,399,502	14,265,500
	19	Revenue less expenses Subtract line 18 from line 12	5,688,597	10,958,852
	Net Assets or Fund Balances		Beginning of Current Year	End of Year
20		Total assets (Part X, line 16)	103,701,453	111,316,370
21		Total liabilities (Part X, line 26)	30,520,407	31,069,836
22		Net assets or fund balances Subtract line 21 from line 20	73,181,046	80,246,534

Part II

Signature Block

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

Sign Here	***** Signature of officer	2016-06-20 Date
	MYRA L GIESENER CHIEF FINANCIAL OFFICER Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name MATT STOWELL	Preparer's signature MATT STOWELL	Date	Check ☐ if self-employed	PTIN P01587994
	Firm's name ▶ CLIFTONLARSONALLEN LLP			Firm's EIN ▶ 41-0746749	
	Firm's address ▶ 220 SOUTH SIXTH STREET SUITE 300 MINNEAPOLIS, MN 55402			Phone no (612) 376-4500	

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

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

THE MINNEAPOLIS JEWISH FEDERATION IS A NONPROFIT ORGANIZATION, WHICH STRIVES TO BUILD COMMUNITY, CARE FOR THE WELFARE OF JEWS EVERYWHERE, AND MAXIMIZE PARTICIPATION IN JEWISH LIFE

2

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

Yes

No

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

3

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

Yes

No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 11,777,754 including grants of \$ 10,747,985) (Revenue \$ 0)

MINNEAPOLIS JEWISH FEDERATION IS A FEDERATED FUNDRAISER SUPPORTING PROGRAMS THAT BENEFIT APPROXIMATELY 33,000 JEWS IN THE GREATER MINNEAPOLIS AREA AND IN NATIONAL AND INTERNATIONAL COMMUNITIES THE FEDERATION RAISES FUNDS THROUGH ANNUAL AND DIRECTED CAMPAIGNS TO PROVIDE MONIES FOR BENEFICIARY AGENCIES TO BUILD NEW AND UPGRADE EXISTING PROGRAMMING AND INFRASTRUCTURES IN THE GREATER MINNEAPOLIS JEWISH COMMUNITY GRANTS ARE MADE TO VARIOUS CHARITIES THROUGHOUT THE UNITED STATES THROUGH ADVISED FUND RECOMMENDATIONS AND GRANTS TO BENEFICIARY ORGANIZATIONS

4b

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

4c

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

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses 11,777,754

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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	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	No
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 Yes	
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 Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	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? If "Yes," complete Schedule G, Part II	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	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	52	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	
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.	44	
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	Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	No
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year.		7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	
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	No
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a	No
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	No
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.		11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		13b	
c Enter the amount of reserves on hand.		13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b If "Yes," has it filed a Form 720 to report these payments? 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 contains a response or note to any line in this Part VI

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MN , CA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records MYRA L GIESENER CFO OF MJF 13100 WAYZATA BLVD NO 200 MINNETONKA, MN 55305 (952) 417-2348	

Part VII

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

Part VII

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

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

1b	Sub-Total	▶			
c	Total from continuation sheets to Part VII, Section A	▶			
d	Total (add lines 1b and 1c)	▶	688,582	0	106,577

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▶4

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	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		

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a9,816			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d240,800			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f23,166,245			
	g	Noncash contributions included in lines 1a-1f \$	3,530,281			
	h	Total. Add lines 1a-1f		23,416,861		
Program Service Revenue	2a		Business Code			
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	1,107,767		-122,853
4		Income from investment of tax-exempt bond proceeds				
5		Royalties				
6a		Gross rents	(i) Real	(ii) Personal		
b		Less rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b		Less cost or other basis and sales expenses	6,157,076			
c		Gain or (loss)	5,569,180			
d		Net gain or (loss)	587,896			587,896
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a			
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			
b		Less direct expenses	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		REGISTRATION FEES	900099	52,232		52,232
b	MISCELLANEOUS REVENUE	900099	51,096		51,096	
c	MISSIONS INCOME	900099	8,500		8,500	
d	All other revenue					
e	Total. Add lines 11a-11d		111,828			
12	Total revenue. See Instructions		25,224,352	0	-122,853	1,930,344

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	7,424,589	7,424,589		
2	Grants and other assistance to domestic individuals See Part IV, line 22	224,741	224,741		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	3,098,655	3,098,655		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	198,487	64,969	49,807	83,711
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	1,612,540	527,817	404,641	680,082
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	36,077	11,809	9,053	15,215
9	Other employee benefits	118,577	38,813	29,755	50,009
10	Payroll taxes	128,117	41,935	32,149	54,033
11	Fees for services (non-employees)				
a	Management				
b	Legal	33,062	2,175	24,456	6,431
c	Accounting	54,073		54,073	
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)	182,276	15,551	120,755	45,970
12	Advertising and promotion	105,595	36,466	9,198	59,931
13	Office expenses	146,371	18,177	75,658	52,536
14	Information technology				
15	Royalties				
16	Occupancy	87,698		87,698	
17	Travel	41,449	37,991	782	2,676
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	352,660	192,997	18,913	140,750
20	Interest	4,856		4,856	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	31,683		31,683	
23	Insurance	42,360	2,787	31,334	8,239
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	MISCELLANEOUS	225,655	23,476	121,893	80,286
b	PROVISION FOR BAD DEBTS	69,415		69,415	
c	EQUIPMENT & REPAIRS	46,564	14,806	17,981	13,777
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	14,265,500	11,777,754	1,194,100	1,293,646
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)				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		1,363,854	1	1,806,924
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		5,887,598	3	13,168,734
	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.	10a803,350			
	b	Less: accumulated depreciation	10b741,723	93,310	10c	61,627
	11	Investments—publicly traded securities		76,402,547	11	76,309,949
	12	Investments—other securities. See Part IV, line 11.		14,497,768	12	14,693,417
	13	Investments—program-related. See Part IV, line 11.		1,532,885	13	1,448,900
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11.		3,923,491	15	3,826,819
	16	Total assets. Add lines 1 through 15 (must equal line 34).		103,701,453	16	111,316,370
Liabilities	17	Accounts payable and accrued expenses		438,957	17	358,452
	18	Grants payable		8,014,155	18	7,120,958
	19	Deferred revenue		188,100	19	186,004
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21,182,808	21	22,553,876
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.			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 D.		696,387	25	850,546
	26	Total liabilities. Add lines 17 through 25.		30,520,407	26	31,069,836
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		64,316,436	27	64,374,373
	28	Temporarily restricted net assets		4,520,378	28	11,527,629
	29	Permanently restricted net assets		4,344,232	29	4,344,532
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		73,181,046	33	80,246,534
	34	Total liabilities and net assets/fund balances		103,701,453	34	111,316,370

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	25,224,352
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,265,500
3	Revenue less expenses Subtract line 2 from line 1	3	10,958,852
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	73,181,046
5	Net unrealized gains (losses) on investments	5	-3,896,222
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	2,858
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	80,246,534

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:

Software Version:

EIN: 41-0693866

Name: MINNEAPOLIS JEWISH FEDERATION

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LINDA KETOVER PRESIDENT	20 00	X		X				0	0	0
(1) MICHAEL BARRY IMMEDIATE PAST PRESIDENT	5 00	X		X				0	0	0
(2) JEREL SHAPIRO TREASURER	1 00	X		X				0	0	0
(3) MIKE EPSTEIN SECRETARY	1 00	X		X				0	0	0
(4) RABBI ALEXANDER DAVIS DIRECTOR	1 00	X						0	0	0
(5) BRAD FRITZ DIRECTOR	1 00	X						0	0	0
(6) SARAH HANLY DIRECTOR	1 00	X						0	0	0
(7) MICHAEL HARAD DIRECTOR	1 00	X						0	0	0
(8) HOWARD KAMINSKY DIRECTOR	1 00	X						0	0	0
(9) BENJIE KAPLAN DIRECTOR	1 00	X						0	0	0
(10) ROBERT KELEN DIRECTOR	1 00	X						0	0	0
(11) DARREN LEDERFINE DIRECTOR	1 00	X						0	0	0
(12) BETH LEONARD DIRECTOR	1 00	X						0	0	0
(13) TODD LEONARD DIRECTOR	1 00	X						0	0	0
(14) DAN LIEBERMAN DIRECTOR	1 00	X						0	0	0
(15) KRIS MACDONALD DIRECTOR	1 00	X						0	0	0
(16) JOSHUA MANN DIRECTOR	1 00	X						0	0	0
(17) HOWARD MILSTEIN DIRECTOR	1 00	X						0	0	0
(18) SUSAN MINSBERG DIRECTOR	1 00	X						0	0	0
(19) ROBIN NEIDORF DIRECTOR	1 00	X						0	0	0
(20) DAVID ORBUCH DIRECTOR	1 00	X						0	0	0
(21) ANDREW PARKER DIRECTOR	1 00	X						0	0	0
(22) LISA RATNER DIRECTOR	1 00	X						0	0	0
(23) PHIL ROSENBLOOM DIRECTOR	1 00	X						0	0	0
(24) TOM SANDERS DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) DAVID SEGAL DIRECTOR	1 00	X						0	0	0
(1) DANNON SHIFF DIRECTOR	1 00	X						0	0	0
(2) BECKIE SKELTON DIRECTOR	1 00	X						0	0	0
(3) RHONDA STEIN DIRECTOR	1 00	X						0	0	0
(4) ALENE SUSSMAN DIRECTOR	1 00	X						0	0	0
(5) RACHAEL VEGAS DIRECTOR	1 00	X						0	0	0
(6) HOWARD ZACK DIRECTOR	1 00	X						0	0	0
(7) MYRA GIESENER CFO	40 00 0 50			X				33,976	0	3,769
(8) GIL MANN INTERIM CEO	40 00 1 00			X				0	0	0
(9) TAMAR KOHN MARKS CHIEF DEVELOPMENT OFFICER	40 00					X		134,972	0	26,450
(10) MORTON NAIMAN FOUNDATION DIRECTOR	40 00					X		121,171	0	9,823
(11) STEPHEN R SILBERFARB FORMER CEO	40 00 1 00						X	279,910	0	37,564
(12) PAUL STEPHENSON FORMER CFO	40 00 0 50						X	118,553	0	28,971

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2014
Open to Public Inspection

Name of the organization MINNEAPOLIS JEWISH FEDERATION	Employer identification number 41-0693866
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Part I

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

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

1

☐

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

2

☐

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☒

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

8

☐

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

9

☐

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

10

☐

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

11

☐

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

a

☐

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

b

☐

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

c

☐

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

d

☐

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

e

☐

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

f

Enter the number of supported organizations _____

g

Provide the following information about the supported organization(s)

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

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	15,283,778	16,303,438	14,899,259	14,980,461	23,416,861	84,883,797
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 to the organization without charge						
4 Total. Add lines 1 through 3	15,283,778	16,303,438	14,899,259	14,980,461	23,416,861	84,883,797
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,355,663
6 Public support. Subtract line 5 from line 4						75,528,134

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	15,283,778	16,303,438	14,899,259	14,980,461	23,416,861	84,883,797
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	815,817	1,157,036	1,205,898	1,537,588	1,230,620	5,946,959
9	Net income from unrelated business activities, whether or not the business is regularly carried on			8,112			8,112
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	255,056	225,660	398,325	239,473	111,828	1,230,342
11	Total support. Add lines 7 through 10						92,069,210
12	Gross receipts from related activities, etc. (see instructions)					12	67,512
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						▶

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	82 030 %
15	Public support percentage for 2013 Schedule A, Part II, line 14	15	81 390 %
16a	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

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

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

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

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

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

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI 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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI 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 Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	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 Part VI .	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 Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	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 Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

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

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

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

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

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME FROM VARIOUS SOURCES - 2010 AMOUNT \$ 255,056 2011 AMOUNT \$ 225,660 2012 AMOUNT \$ 398,325 2013 AMOUNT \$ 239,473 2014 AMOUNT \$ 111,828

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

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

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

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

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

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

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

Name of the organization MINNEAPOLIS JEWISH FEDERATION	Employer identification number 41-0693866
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ 0
3	Volunteer hours	0

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ 0
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ 0
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

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

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

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

Part II-A

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

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

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

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

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

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		85,703
j	Total. Add lines 1c through 1i.			85,703
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Return Reference	Explanation
PART II-B, LINE 1, LOBBYING ACTIVITIES	THE FEDERATION PAID \$85,703 TO THE JEWISH COMMUNITY RELATIONS COUNCIL FOR A GOVERNMENT RELATIONS POSITION FOR LOBBYING ON BEHALF OF THE JEWISH COMMUNITY AS A WHOLE

[illegible]

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

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

Name of the organization MINNEAPOLIS JEWISH FEDERATION	Employer identification number 41-0693866
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	238	698
2 Aggregate value of contributions to (during year)	3,079,698	7,899,516
3 Aggregate value of grants from (during year)	3,826,070	3,226,607
4 Aggregate value at end of year	26,058,498	63,174,625
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☒ Yes ☐ No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	☒ Yes ☐ No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

(i) Revenue included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenue included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☒ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table
- | | |
|----------------------------------|--------|
| | Amount |
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☒

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

- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|--|-----------------|---------------|---------------------|---------------------|--------------------|
| 1a Beginning of year balance | 5,971,012 | 5,622,087 | 5,035,932 | 4,709,239 | 4,353,255 |
| b Contributions | 300 | 797 | 101,807 | 625 | 6,213 |
| c Net investment earnings, gains, and losses | -182,103 | 841,849 | 691,281 | 329,451 | 590,334 |
| d Grants or scholarships | 257,775 | 493,721 | 206,933 | | |
| e Other expenditures for facilities and programs | | | | 3,383 | 240,563 |
| f Administrative expenses | 59,520 | | | | |
| g End of year balance | 5,471,914 | 5,971,012 | 5,622,087 | 5,035,932 | 4,709,239 |
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 79 400 %

c Temporarily restricted endowment ▶ 20 600 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

(ii) related organizations
- | | | |
|--------|-----|----|
| | Yes | No |
| 3a(i) | | No |
| 3a(ii) | | No |
| 3b | | |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		446,900	426,928	19,972
c Leasehold improvements				
d Equipment		75,993	34,338	41,655
e Other		280,457	280,457	0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				61,627

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	21,470,796
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains (losses) on investments2a-3,896,222		
b	Donated services and use of facilities2b		
c	Recoveries of prior year grants2c		
d	Other (Describe in Part XIII)2d501,091		
e	Add lines 2a through 2d	2e	-3,395,131
3	Subtract line 2e from line 1	3	24,865,927
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a		
b	Other (Describe in Part XIII)4b358,425		
c	Add lines 4a and 4b	4c	358,425
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	25,224,352

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	16,622,076
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
a	Donated services and use of facilities2a		
b	Prior year adjustments2b		
c	Other losses2c		
d	Other (Describe in Part XIII)2d2,715,001		
e	Add lines 2a through 2d	2e	2,715,001
3	Subtract line 2e from line 1	3	13,907,075
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a		
b	Other (Describe in Part XIII)4b358,425		
c	Add lines 4a and 4b	4c	358,425
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	14,265,500

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART IV, LINE 2B	THE FEDERATION HOLDS FUNDS FOR WHICH DONORS HAVE SPECIFIED THE ULTIMATE BENEFICIARY, BUT FOR WHICH DISTRIBUTIONS HAVE NOT YET BEEN MADE
PART V, LINE 4	ENDOWMENT FUNDS ARE USED TO SUPPORT JEWISH LIFE IN THE GREATER MINNEAPOLIS AREA AND BEYOND
PART X, LINE 2	THE ORGANIZATION RECEIVED AUTHORITY FROM THE INTERNAL REVENUE SERVICE (IRS) TO OPERATE AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND THE JCBC IS EXEMPT UNDER SECTION 501(C)(25) OF THE IRC. THE SUPPORTING FOUNDATIONS INCLUDED IN THESE CONSOLIDATED FINANCIAL STATEMENTS ARE ALSO EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE IRC. THE ORGANIZATION HAS ADOPTED A POLICY THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS. THE POLICY DESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. THE IMPLEMENTATION OF THIS POLICY HAD NO IMPACT ON THE ORGANIZATIONS' CONSOLIDATED FINANCIAL STATEMENTS.
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 2,858 REVENUES OF AFFILIATES REPORTED ON OTHER RETURNS 498,233
PART XI, LINE 4B - OTHER ADJUSTMENTS	ELIMINATED TRANSACTIONS WITH RELATED ORGANIZATIONS 358,425
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES OF AFFILIATES REPORTED ON OTHER RETURNS 2,715,001
PART XII, LINE 4B - OTHER ADJUSTMENTS	ELIMINATED TRANSACTIONS WITH RELATED ORGANIZATIONS 358,425

[illegible]

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MINNEAPOLIS JEWISH FEDERATION

Employer identification number
41-0693866

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		11,781,780
(2) SEE PART V FOR EXPLANATION ON PASSTHROUGH GRANTS OUTSIDE THE US	0	0	GRANTS (INDIRECT)		3,049,342
(3) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS (DIRECT)		49,313
(4)					
(5)					
3a Sub-total	0	0			14,880,435
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			14,880,435

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SEE PART V	SEE PART V FOR MORE INFORMATION ON PASSTHROUGH GRANTS OUTSIDE THE US	3,049,342	WIRE/CHECK	0	N/A	N/A
(2)			MIDDLE EAST AND NORTH AFRICA		20,000	WIRE/CHECK	0	N/A	N/A
(3)			MIDDLE EAST AND NORTH AFRICA		29,313	WIRE/CHECK	0	N/A	N/A
(4)									

2

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

3

3

Enter total number of other organizations or entities ▶

0

Part III

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

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

Part IV Foreign Forms

- 1

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

☒ Yes ☐ No
- 2

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

☐ Yes ☒ No
- 3

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

☒ Yes ☐ No
- 4

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

☒ Yes ☐ No
- 5

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

☐ Yes ☒ No
- 6

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

☐ Yes ☒ No

Part V

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	THE FEDERATION PRIMARILY USES JEWISH FEDERATIONS OF NORTH AMERICA (JFNA) TO PERFORM GRANT MAKING TO ORGANIZATIONS OUTSIDE THE UNITED STATES. JFNA IS THE OVERSEAS GRANT MAKING ORGANIZATION FOR 155 FEDERATIONS IN THE UNITED STATES. JFNA PERFORMS ALL DUE DILIGENCE WITH RESPECT TO EVALUATING THE RECIPIENT ORGANIZATIONS TO ENSURE THEY MEET THE ELIGIBILITY CRITERIA REQUIRED TO MEET THE EQUIVALENCY OF 501(C)(3) STATUS IN THE UNITED STATES. THE FEDERATION SPECIFIES CERTAIN PORTIONS FOR RECIPIENT ORGANIZATIONS IN ISRAEL AND THE FORMER SOVIET UNION, ALTHOUGH SPECIFIC DOLLAR AMOUNTS PER REGION CANNOT BE DETERMINED. THE GRANT AMOUNTS REPORTED IN THE FEDERATION'S FORM 990 WILL ALSO BE REPORTED ON JFNA'S FORM 990, SCHEDULE F.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	ACCRUAL METHOD TO ACCOUNT FOR EXPENDITURES

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization
MINNEAPOLIS JEWISH FEDERATION

Employer identification number
41-0693866

Part I General Information on Grants and Assistance

1

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

☒ Yes ☐ No

2

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

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

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

2

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

115

3

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

0

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) CAMP SCHOLARSHIPS	297	215,605		N/A	N/A
(2) SCHOLARSHIPS TO TEACHERS	15	9,136		N/A	N/A

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	AT THE TIME A GRANT IS MADE, THE FEDERATION DESIGNATES THE INTENDED USE OF THE FUNDS THE FEDERATION CONDUCTS NO FURTHER MONITORING OF THE FUNDS

Additional Data

Software ID:
Software Version:
EIN: 41-0693866
Name: MINNEAPOLIS JEWISH FEDERATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABBOTT NORTHWESTERN HOSPITAL FOUNDATION PO BOX 43 MINNEAPOLIS,MN 55407	04-3643816	501(C)(3)	15,000		N/A	N/A	MOTHER BABY CENTER, CRITICAL CARE CAMPAIGN
ACLU OF MINNESOTA FOUNDATION2300 MYRTLE AVENUE SUITE 180 SAINT PAUL,MN 55114	41-6050012	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
ADATH JESHURUN CONGREGATION10500 HILLSIDE LANE WEST MINNETONKA,MN 55305	41-0693940	501(C)(3)	88,381		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AINSWORTH FOUNDATION 6327 SW CAPITOL HIGHWAY STE C PMB 289 RICHMOND HILL,OR 972392190	93-1148089	501(C)(3)	7,000		N/A	N/A	GENERAL OPERATING SUPPORT
AISH - MINNESOTA2830 INGLEWOOD AVE S MINNEAPOLIS,MN 55416	20-5474141	501(C)(3)	13,943		N/A	N/A	GENERAL OPERATING SUPPORT
ALZHEIMERS DISEASE AND RELATED DISORDERS ASSOC MN & ND7900 WEST 78TH SUITE 100 EDINA,MN 55439	41-1361624	501(C)(3)	14,500		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC711 THIRD AVE NEW YORK,NY 10017	13-1656634	501(C)(3)	145,750		N/A	N/A	PROGRAMS SUPPORTING VULNERABLE POPULATION IN ISRAEL, HUNGER RELIEF
AMERICAN JEWISH WORLD SERVICE45 WEST 36TH STREET 10TH FLOOR NEW YORK,NY 10018	22-2584370	501(C)(3)	20,100		N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN JOINT DISTRIBUTION COMMITTEE711 THIRD AVE NEW YORK,NY 10017	13-1656634	501(C)(3)	15,000		N/A	N/A	GENERAL OPERATING SUPPORT, EMERGENCY USE IN ISRAEL AND UKRAINE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED CROSS 1201 WRIVER PKWY MINNEAPOLIS,MN 55454	53-0196605	501(C)(3)	15,000		N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN REFUGEE COMMITTEE WORLD HEADQUARTERS615 1ST AVENUE NE SUITE 500 MINNEAPOLIS,MN 55413	36-3241033	501(C)(3)	36,800		N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN TECHNION SOCIETY55 EAST 59TH STREET NEWYORK,NY 10022	13-0434195	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMOS AND CELIA HEILICHER MINNEAPOLIS JEWISH DAY SCHOOL4330 CEDAR LAKE ROAD ST LOUIS PARK,MN 55416	41-1522634	501(C)(3)	417,718		N/A	N/A	GENERAL OPERATING SUPPORT
AMPERSAND FAMILIES 1700 2ND STREET NE MINNEAPOLIS,MN 55413	14-2004438	501(C)(3)	10,000		N/A	N/A	TRAIN AND CERTIFY STAFF FOR HEALING EARLY CHILDHOOD TRAUMA
ARZNA - UNION FOR REFORM JUDAISM633 3RD AVE NEW YORK,NY 10017	13-1663143	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASCENSION PLACE INC 1803 BRYANT AVENUE NORTH MINNEAPOLIS, MN 55411	41-1396238	501(C)(3)	7,730		N/A	N/A	TRAINING AND CONSULTING AT ST ANNE'S PLACE
BABY'S SPACE A PLACE TO GROW 2438 18TH AVENUE SOUTH MINNEAPOLIS, MN 55404	20-4502788	501(C)(3)	60,000		N/A	N/A	GENERAL OPERATING SUPPORT
BAIS YAAKOV HIGH SCHOOL OF MINNEAPOLIS 4221 SUNSET BOULEVARD ST LOUIS PARK, MN 55416	41-1797413	501(C)(3)	83,626		N/A	N/A	GENERAL OPERATING SUPPORT, SPECIAL EDUCATION PROGRAMS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAIS YAAKOV OF BALTIMORE11111 PARK HEIGHTS AVE OWINGS MILLS,MD 21117	52-0613700	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
BARRY FAMILY CAMPUS CORPORATION4330 SOUTH CEDAR LAKE ROAD ST LOUIS PARK,MN 55416	20-2381049	501(C)(3)	164,552		N/A	N/A	GENERAL OPERATING SUPPORT
BET SHALOM CONGREGATION13613 ORCHARD ROAD MINNETONKA,MN 55305	41-1409280	501(C)(3)	147,356		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BET SHALOM ENDOWMENT 13613 ORCHARD ROAD MINNETONKA,MN 55305	20-2829035	501(C)(3)	10,000		N/A	N/A	SUPPORT ENDOWMENT
BETH EL SYNAGOGUE5225 BARRY STREET WEST MINNEAPOLIS,MN 55416	41-0711587	501(C)(3)	281,773		N/A	N/A	GENERAL OPERATING SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION33 EAST 33RD STREET 7TH FLOOR NEW YORK,NY 10016	13-4092050	501(C)(3)	72,000		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROTHER'S BROTHER FOUNDATION1200 GALVESTON AVENUE PITTSBURGH, PA 152331604	34-6562544	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
CAMP RAMAH IN WI65 EAST WACKER PLACE SUITE 1200 CHICAGO,IL 60601	36-6009250	501(C)(3)	13,350		N/A	N/A	GENERAL OPERATING SUPPORT, SCHOLARSHIP FUND
CEDAR RIVERSIDE PEOPLE'S CENTER425 20TH AVENUE SOUTH MINNEAPOLIS,MN 55454	41-0982430	501(C)(3)	10,000		N/A	N/A	LEVEL II ULTRASOUND MACHINE FOR PRENATAL HEALTH OF EAST AFRICAN WOMEN

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

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CHILDREN'S CANCER RESEARCH FUND (CCRF INC)7301 OHMS LANE SUITE 460 MINNEAPOLIS, MN 55439	41-1893645	501(C)(3)	7,500		N/A	N/A	GENERAL OPERATING SUPPORT
CHILDRENS DISABILITY SERVICE ASSOC - FRIENDSHIP VENTURES 10509 108TH STREET NW ANNANDALE, MN 55302	41-1543013	501(C)(3)	20,000		N/A	N/A	ZIP LINE AND RIDING LIFT AT CAMP COURAGE
CHILDREN'S OF MN FOUNDATION2910 CENTRE POINTE DRIVE ROSEVILLE, MN 55113	41-1814223	501(C)(3)	18,500		N/A	N/A	PURCHASE OF 2 HEARLAB SYSTEM-CORTICAL AUDITORY EVOKED POTENTIAL ANALYZERS

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

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COMMONBOND COMMUNITIES328 KELLOGG BLVD WEST ST PAUL,MN 55102	41-1260469	501(C)(3)	25,000		N/A	N/A	GENERAL OPERATING SUPPORT
COURAGE KENNY FOUNDATION3915 GOLDEN VALLEY ROAD MINNEAPOLIS,MN 55422	41-1952989	501(C)(3)	10,500		N/A	N/A	PEDIATRIC SPORT WHEELCHAIRS FOR COURAGE KENNY REHAB INSTITUTE
DISABLED AMERICAN VETERANS CHARITABLE SERVICE TRUST INC3725 ALEXANDRIA PIKE COLD SPRINGS,KY 41076	52-1521276	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT

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

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DOCTORS WITHOUT BORDERS USA INC333 SEVENTH AVE 2ND FLOOR NEWYORK,NY 10001	13-3433452	501(C)(3)	11,800		N/A	N/A	GENERAL OPERATING SUPPORT
EDINA COMMUNITY FOUNDATION5280 GRANDVIEW SQUARE EDINA,MN 55436	41-1315037	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
EDINA EDUCATION FUND 5701 NORMANDALE ROAD EDINA,MN 55424	41-1991929	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT, EDINA GIVE AND GO

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

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ENVIRONMENTAL DEFENSE INCORP257 PARK AVENUE SOUTH NEWYORK,NY 10010	11-6107128	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
FISHER HOUSE FOUNDATION INC111 ROCKVILLE PIKE SUITE 600 ROCKVILLE,MD 20852	11-3158401	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
FOOD GROUP8501 54TH AVENUE NORTH NEWHOPE,MN 55428	41-1246504	501(C)(3)	5,500		N/A	N/A	GENERAL OPERATING SUPPORT

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FRIENDS OF ARAVA INSTITUTE LTD896 BEACON STREET BOSTON,MA 02215	11-3485736	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
FRIENDS OF SAINT PAUL COLLEGE235 MARSHALL AVENUE SAINT PAUL,MN 55102	27-1631689	501(C)(3)	7,347		N/A	N/A	NEWBORN/PREEMIE SIMULATOR MANNEQUIN FOR SPC SIMULATION LAB
GREATER TWIN CITIES UNITED WAY404 SOUTH EIGHTH STREET MINNEAPOLIS,MN 55404	41-1973442	501(C)(3)	266,250		N/A	N/A	GENERAL OPERATING SUPPORT

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GREENPEACE FUND INC 702 H STREET NW NO 300 WASHINGTON,DC 20001	95-3313195	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
GROVES ACADEMY3200 HIGHWAY 100 SOUTH ST LOUIS PARK,MN 55116	41-0979871	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
HABONIM DROR FOUNDATION INC114 WEST 26TH STREET ROOM 1004 NEW YORK,NY 10001	11-3301957	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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HADASSAH FOUNDATION INC50 WEST 58TH STREET NEWYORK,NY 10019	13-4022483	501(C)(3)	6,835		N/A	N/A	GENERAL OPERATING SUPPORT
HAROLD GRINSPOON FOUNDATION67 HUNT STREET SUITE 100 AGAWAM,MA 01001	04-6685725	501(C)(3)	42,281		N/A	N/A	GENERAL OPERATING SUPPORT
HERZL CAMP7204 WEST 27TH STREET SUITE 226 ST LOUIS PARK,MN 55426	41-6009136	501(C)(3)	205,900		N/A	N/A	GENERAL OPERATING SUPPORT

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HILLEL FOUNDATION MINNESOTA1521 UNIVERSITY AVENUE SE MINNEAPOLIS,MN 55414	41-6038613	501(C)(3)	89,506		N/A	N/A	SHABBAT AT TCF STADIUM, INTERNSHIP
HOPE FOR THE WARRIORS PMB 48 1335 SUITE E WESTERN BLVD JACKSONVILLE,NC 28546	20-5182295	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
HUMAN RIGHTS FIRST333 SEVENTH AVE 13TH FLOOR NEWYORK,NY 100015108	13-3116646	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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HUNGER SOLUTIONS MINNESOTA555 PARK STREET SUITE 420 SAINT PAUL,MN 55103	36-3567366	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
INTERNATIONAL MEDICAL CORPS1919 SANTA MONICA BLVD STE 400 SANTA MONICA,CA 90404	95-3949646	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
ISRAEL TENNIS CENTERS FOUNDATION INC3275 WEST HILLSBORO BOULEVARD SUITE 102 DEERFIELD BEACH,FL 33442	13-2961273	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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JEWFOLK MEDIA INC4330 SOUTH CEDAR LAKE ROAD ST LOUIS PARK,MN 55416	27-4463056	501(C)(3)	9,000		N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL633 THIRD AVENUE 21ST FLOOR NEW YORK,NY 10017	23-0053483	501(C)(3)	30,000		N/A	N/A	ISRAEL LONE SOLDIER PROGRAM, IMMIGRATION ASSISTANCE
JEWISH COMMUNITY ACTION2375 UNIVERSITY AVENUE WEST SUITE 150 SAINT PAUL,MN 55114	41-1830619	501(C)(3)	13,080		N/A	N/A	GENERAL OPERATING SUPPORT

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JEWISH COMMUNITY CENTER OF THE GREATER ST PAUL AREA1375 ST PAUL AVENUE SAINT PAUL,MN 55116	41-0698596	501(C)(3)	11,952		N/A	N/A	GENERAL OPERATING SUPPORT, CAMP BUTWIN
JEWISH COMMUNITY RELATIONS COUNCIL OF MINNESOTA & DAKOTAS12 NORTH 12TH STREET SUITE 480 MINNEAPOLIS,MN 55403	41-0826434	501(C)(3)	316,800		N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH FAMILY AND CHILDREN'S SERVICE 13100 WAYZATA BOULEVARD SUITE 400 MINNETONKA,MN 55305	41-0693860	501(C)(3)	1,160,877		N/A	N/A	GENERAL OPERATING SUPPORT

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JEWISH FEDERATION OF GREATER PHOENIX12701 NORTH SCOTTSDALE ROAD SUITE 201 SCOTTSDALE,AZ 85254	86-0096784	501(C)(3)	26,800		N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH FEDERATIONS OF NORTH AMERICAWALL STREET STATION PO BOX 157 NEW YORK,NY 10268	13-1624240	501(C)(3)	497,988		N/A	N/A	BIRTHRIGHT ISRAEL, GENERAL OPERATING SUPPORT
JEWISH THEOLOGICAL SEMINARY3080 BROADWAY NEWYORK,NY 10027	13-0887640	501(C)(3)	6,000		N/A	N/A	GENERAL OPERATING SUPPORT

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JEWISH UNITED FUND OF METROPOLITAN CHICAGO 30 SOUTH WELLS STREET CHICAGO,IL 606065056	36-2167034	501(C)(3)	5,000		N/A	N/A	FRENCH TERROR AND SECURITY FUND SUPPORT
KENESSETH ISRAEL SYNAGOGUE4330 WEST 28TH STREET ST LOUIS PARK,MN 55416	41-0780896	501(C)(3)	61,721		N/A	N/A	GENERAL OPERATING SUPPORT
KIVA MICROFUNDS875 HOWARD STREET NO 340 SAN FRANCISCO ,CA 94103	71-0992446	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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LEUKEMIA & LYMPHOMA SOCIETY8441 WAYZATA BLVD SUITE 340 GOLDEN VALLEY, MN 55426	13-5644916	501(C)(3)	11,000		N/A	N/A	GENERAL OPERATING SUPPORT
MASORTI FOUNDATION FOR CONSERVATIVE JUDAISM IN ISRAEL475 RIVERSIDE DRIVE SUITE 832 NEW YORK,NY 10015	13-3137586	501(C)(3)	29,200		N/A	N/A	GENERAL OPERATING SUPPORT
MAYO CLINIC DEPARTMENT OF DEVELOPMENT200 1ST STREET SOUTHWEST ROCHESTER,MN 55905	41-6011702	501(C)(3)	5,250		N/A	N/A	CENTER FOR THE SCIENCE OF HEALTH CARE DELIVERY

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MAZONPO BOX 96119 WASHINGTON, DC 20090	22-2624532	501(C)(3)	11,250		N/A	N/A	GENERAL OPERATING SUPPORT
MINNEAPOLIS HEART INSTITUTE FOUNDATION 920 EAST 28TH STREET SUITE 100 MINNEAPOLIS, MN 55407	41-1426406	501(C)(3)	6,000		N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA CENTER FOR ENVIRONMENTAL ADVOCACY 26 EXCHANGE STREET EAST SUITE 206 ST PAUL, MN 55101	23-7412105	501(C)(3)	25,000		N/A	N/A	GENERAL OPERATING SUPPORT

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MINNESOTANS AGAINST TERRORISMPO BOX 368 HOPKINS,MN 55343	35-2162870	501(C)(3)	25,000		N/A	N/A	GENERAL OPERATING SUPPORT
NECHAMA - JEWISH DISASTER RESPONSE4330 CEDAR LAKE ROAD SOUTH ST LOUIS PARK,MN 55416	41-1998750	501(C)(3)	53,500		N/A	N/A	GENERAL OPERATING SUPPORT
NEW ISRAEL FUND330 7TH AVENUE 11TH FLOOR NEW YORK,NY 10001	94-2607722	501(C)(3)	40,000		N/A	N/A	GENERAL OPERATING SUPPORT

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OREGON FOOD BANKPO BOX 55370 PORTLAND,OR 972385370	93-0785786	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
PACER CENTER8161 NORMANDALE BLVD SOUTH BLOOMINGTON,MN 55437	41-1306304	501(C)(3)	20,500		N/A	N/A	GENERAL OPERATING SUPPORT
PARTNERS IN HEALTH888 COMMONWEALTH AVE THIRD FLOOR BOSTON,MA 02215	04-3567502	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT

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PEF ISRAEL ENDOWMENT FUNDS INC630 THIRD AVENUE SUITE 1501 NEW YORK,NY 10017	13-6104086	501(C)(3)	36,000		N/A	N/A	FRIENDS OF PORIYA HOSPITAL, AMICIHAI AUGMENTATIVE COMMUNICATION
PEOPLE FOR PARKSPO BOX 24901 MINNEAPOLIS,MN 55424	36-3339180	501(C)(3)	15,250		N/A	N/A	ACCESSIBLE PLAYGROUND AT MINNEHAHA FALLS PARK
PEOPLE SERVING PEOPLE INC614 SOUTH 3RD STREET MINNEAPOLIS,MN 554151034	41-1443148	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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PLANNED PARENTHOOD OF MNSD671 VANDALIA STREET ST PAUL,MN 55114	41-0948382	501(C)(3)	5,900		N/A	N/A	GENERAL OPERATING SUPPORT
PTA MN CONGRESS TURTLE LAKE ELEMENTARY 1141 LEPAK COURT SHOREVIEW,MN 55126	41-1775883	501(C)(3)	20,000		N/A	N/A	SUPPORT "A PLAYGROUND FOR EVERYONE"
PUBLIC CITIZEN FOUNDATION1600 20TH STREET NW WASHINGTON,DC 20009	52-1263996	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT

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SABES JEWISH COMMUNITY CENTER4330 SOUTH CEDAR LAKE ROAD ST LOUIS PARK,MN 55416	41-0833543	501(C)(3)	697,618		N/A	N/A	GENERAL OPERATING SUPPORT, INCLUSION PROGRAM, PLAYGROUND, VOICE
SAVE THE CHILDREN501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD,CT 06825	06-0726487	501(C)(3)	20,000		N/A	N/A	GENERAL OPERATING SUPPORT
SCHECHTER INSTITUTES INCBOX 3566 PO BOX 8500 PHILADELPHIA,PA 19178	22-3342043	501(C)(3)	12,500		N/A	N/A	TALI EDUCATION FUND, GENERAL OPERATING SUPPORT

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SCOTTSDALE CULTURAL COUNCIL7380 EAST SECOND STREET SCOTTSDALE,AZ 85251	86-0593786	501(C)(3)	5,000		N/A	N/A	CENTER FOR THE PERFORMING ARTS
SECOND HARVEST HEARTLAND1140 GERVAIS AVENUE ST PAUL,MN 55109	23-7417654	501(C)(3)	40,250		N/A	N/A	GENERAL OPERATING SUPPORT
SHA'ARIM4820 MINNETONKA BOULEVARD SUITE 300 300 ST LOUIS PARK,MN 55416	41-1917521	501(C)(3)	95,891		N/A	N/A	DARKAYNU, FRIENDS 'N FUN, GENERAL OPERATING SUPPORT

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SHAREI CHESED CONGREGATION1712 HOPKINS CROSSROADS MINNETONKA,MN 55305	41-6027517	501(C)(3)	11,342		N/A	N/A	GENERAL OPERATING SUPPORT
SHIR TIKVAH CONGREGATION1360 W MINNEHAHA PARKWAY MINNEAPOLIS,MN 55419	41-1632627	501(C)(3)	88,742		N/A	N/A	GENERAL OPERATING SUPPORT
SHOLOM COMMUNITY ALLIANCE3620 PHILLIPS PARKWAY SOUTH ST LOUIS PARK,MN 55426	41-1837022	501(C)(3)	39,436		N/A	N/A	GENERAL OPERATING SUPPORT

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SHOLOM FOUNDATION 3610 PHILLIPS PARKWAY ST LOUIS PARK,MN 55426	36-3411361	501(C)(3)	6,326		N/A	N/A	GENERAL OPERATING SUPPORT
SIERRA CLUB FOUNDATION85 SECOND STREET SUITE 750 SAN FRANCISCO,CA 94105	94-6069890	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT
SOCIAL VENTURE PARTNERS MN14451 HIGHWAY 7 SUITE 209 MINNETONKA,MN 55345	03-0612359	501(C)(3)	13,000		N/A	N/A	GENERAL OPERATING SUPPORT

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ST CROIX VALLEY FOUNDATION516 SECOND STREET SUITE 214 HUDSON,WI 54016	41-1817315	501(C)(3)	5,000		N/A	N/A	POLLINATOR FRIENDLY ALLIANCE
STEP-ST LOUIS PARK EMERGENCY PROGRAM 6812 WEST LAKE STREET ST LOUIS PARK,MN 55426	51-0188692	501(C)(3)	10,000		N/A	N/A	GENERAL OPERATING SUPPORT, KOSHER FOOD SHELF
TALMUD TORAH OF MINNEAPOLIS4330 SOUTH CEDAR LAKE ROAD ST LOUIS PARK,MN 55416	41-0714419	501(C)(3)	284,646		N/A	N/A	GENERAL OPERATING SUPPORT

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TEMPLE ISRAEL2324 EMERSON AVENUE MINNEAPOLIS,MN 55405	41-0705807	501(C)(3)	449,594		N/A	N/A	GENERAL OPERATING SUPPORT, CAPITAL CAMPAIGN
THE BLAKE SCHOOLS12-2577 PO BOX 86 MINNEAPOLIS,MN 55486	23-7243247	501(C)(3)	10,800		N/A	N/A	GENERAL OPERATING SUPPORT
TORAH ACADEMY OF MINNEAPOLIS2800 JOPPA AVENUE SOUTH ST LOUIS PARK,MN 55416	41-6007486	501(C)(3)	267,412		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TORAH INSTITUTE OF BALTIMORE35 ROSEWOOD LANE OWINGS MILLS,MD 21117	23-7304990	501(C)(3)	5,500		N/A	N/A	GENERAL OPERATING SUPPORT
UNION OF CONCERNED SCIENTISTS INCPO BOX 4123 WOBURN,MA 018884123	04-2535767	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
UNIVERSITY OF MINNESOTA - INSTITUTE ON THE ENVIRONMENTPO BOX 70870 ST PAUL,MN 55170	41-6042488	501(C)(3)	100,000		N/A	N/A	ENSIA GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET SE SUITE 500 MINNEAPOLIS,MN 55455	41-6042488	501(C)(3)	50,900		N/A	N/A	GENERAL OPERATING SUPPORT
UPPER MIDWEST MERKOS JEWISH EDUCATION ASSOCIATION1748 HAMPSHIRE CT SAINT PAUL,MN 55116	41-6141172	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
WASHBURN CHILD GUIDANCE CENTER1100 GLENWOOD AVENUE MINNEAPOLIS,MN 55405	41-6014916	501(C)(3)	11,000		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON INSTITUTE FOR NEAR EAST POLICY 1828 L STREET NW SUITE 1050 WASHINGTON, DC 20036	52-1376034	501(C)(3)	11,000		N/A	N/A	GENERAL OPERATING SUPPORT
WATER BUFFALO CLUB INC 1547 SOUTH OAKHURST DRIVE LOS ANGELES, CA 90035	95-4250320	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
WILDERNESS INQUIRY INC 808 14TH AVENUE SOUTHEAST MINNEAPOLIS, MN 55414	93-0708637	501(C)(3)	19,500		N/A	N/A	CAMP ACCESSIBILITY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD RESOURCES INSTITUTE10 G STREET NE SUITE 800 WASHINGTON,DC 20002	52-1257057	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
YMCA OF THE GREATER TWIN CITIES2125 EAST HENNEPIN AVENUE MINNEAPOLIS,MN 55413	45-2563299	501(C)(3)	5,000		N/A	N/A	GENERAL OPERATING SUPPORT
YOUNG JUDAEA GLOBAL INC575 8TH AVENUE 11TH FLOOR NEWYORK,NY 10038	45-2640858	501(C)(3)	100,000		N/A	N/A	GENERAL OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA OF MINNEAPOLIS 1130 NICOLLET MALL MINNEAPOLIS, MN 554032475	41-0693891	501(C)(3)	25,000		N/A	N/A	POWER TO SOAR CAMPAIGN

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MINNEAPOLIS JEWISH FEDERATION

Employer identification number
41-0693866

Part I

Questions Regarding Compensation

	Yes	No
1a 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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b 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	
2 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	
3 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 ☐ Independent compensation consultant ☐ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?	4a	Yes
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a	No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b	No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?	6a	No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6b	No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TAMAR KOHN MARKS, CHIEF DEVELOPMENT OFFICER	(i)	133,088	0	1,884	2,858	23,592	161,422	0
	(ii)	0	0	0	0	0	0	0
2 STEPHEN R SILBERFARB, FORMER CEO	(i)	221,946	0	57,964	20,358	17,206	317,474	0
	(ii)	0	0	0	0	0	0	0
3 PAUL STEPHENSON, FORMER CFO	(i)	111,795	5,000	1,758	2,572	26,399	147,524	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 4A	STEPHEN SILBERFARB RECEIVED SEVERANCE PAYMENTS IN THE AMOUNT OF \$57,145

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MINNEAPOLIS JEWISH FEDERATION

Employer identification number
41-0693866

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	144	3,530,281	STOCK MARKET QUOTES
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶()				
27 Other ▶()				
28 Other ▶ ()				

29

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

29

0

30a

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

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

32a

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

32a

No

b

If "Yes," describe in Part II

33

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

Part III

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

Return Reference	Explanation
PART I, COLUMN (B)	THE FEDERATION REPORTS THE NUMBER OF CONTRIBUTORS ON PART I, COLUMN B

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.****▶ Attach to Form 990 or 990-EZ.****▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.**

OMB No 1545-0047

2014**Open to Public
Inspection**Name of the organization
MINNEAPOLIS JEWISH FEDERATION**Employer identification number**

41-0693866

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE FEDERATION HAS AN EXECUTIVE COMMITTEE, COMPRISED ENTIRELY OF VOTING MEMBERS OF THE BOARD OF DIRECTORS, WITH POWER TO TRANSACT ALL REGULAR BUSINESS OF THE FEDERATION DURING THE PERIOD BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, SUBJECT TO ANY PRIOR LIMITATION IMPOSED BY THE BOARD OF DIRECTORS AND SUBJECT TO THE ULTIMATE DIRECTION AND CONTROL OF THE BOARD. AUTHORITY OVER THE FOLLOWING MATTERS IS RETAINED BY THE BOARD OF DIRECTORS AND IS NOT DELEGATED TO THE EXECUTIVE COMMITTEE. 1. THE DISTRIBUTION OF THE PROCEEDS OF THE FEDERATION'S ANNUAL CAMPAIGN AMONG THE FEDERATION'S BENEFICIARY AGENCIES AND OTHER RECIPIENTS, 2. THE ELECTION OF THOSE OFFICERS OF THE FEDERATION WHO ARE CHOSEN BY THE BOARD, 3. ANY DECISION TO ENTER INTO A MERGER OR CONSOLIDATION WITH ANOTHER ENTITY TO SELL, LEASE, TRANSFER, OR OTHERWISE DISPOSE OF ALL OR SUBSTANTIALLY ALL OF THE FEDERATION'S PROPERTY AND ASSETS, 4. ANY AMENDMENT TO THE BYLAWS OR ARTICLES OF INCORPORATION OF THE FEDERATION, AND 5. ANY ELECTION TO FILL A VACANCY AMONG THE DIRECTORS.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BETH LEONARD AND TODD LEONARD - FAMILY RELATIONSHIP GIL MANN AND JOSHUA MANN - FAMILY RELATIONSHIP

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE FEDERATION'S MEMBERS CONSIST OF ANY INDIVIDUAL WHO IS AT LEAST 18 YEARS OLD AND WHO HAS PLEDGED OR CONTRIBUTED AT LEAST \$10 TO THE MOST RECENTLY COMPLETED ANNUAL GENERAL CAMPAIGN

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	SELECTION OF THE FOLLOWING DIRECTORS REQUIRE THE APPROVAL OF THE MEMBERS 1 ONE RABBINIC REPRESENTATIVE SELECTED BY THE NOMINATING COMMITTEE, 2 ONE SYNAGOGUE PRESIDENT REPRESENTATIVE SELECTED BY THE NOMINATING COMMITTEE, 3 ONE REPRESENTATIVE OF THE BOARD CHAIRS OR PRESIDENTS OF THE PARTNER AGENCIES SELECTED BY THE NOMINATING COMMITTEE, 4 ONE REPRESENTATIVE OF THE CHIEF EXECUTIVE OFFICERS OF THE PARTNER AGENCIES SELECTED BY THE NOMINATING COMMITTEE, 5 FIVE DIRECTORS-AT-LARGE SELECTED BY THE NOMINATING COMMITTEE, 6 UP TO THREE CAMPAIGN REPRESENTATIVES SELECTED BY THE PRESIDENT, AND 7 UP TO FIVE PRESIDENTIAL APPOINTMENTS SELECTED BY THE PRESIDENT

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 WAS REVIEWED BY THE ORGANIZATION'S CHIEF FINANCIAL OFFICER IT WAS THEN REVIEWED AND APPROVED BY THE FINANCE COMMITTEE OF THE ORGANIZATION THE FINANCE COMMITTEE IS MADE UP OF INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS AND INDIVIDUAL LAY LEADERS OF THE COMMUNITY THE PUBLIC INSPECTION COPY OF THE 990 IS THEN PROVIDED TO ALL BOARD MEMBERS PRESENT AT A BOARD MEETING PRIOR TO THE FILING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO ALL BOARD MEMBERS AND STAFF COVERED INDIVIDUALS ARE REQUIRED TO COMPLETE AN ANNUAL DISCLOSURE FORM INDIVIDUALS ARE REQUIRED TO FULLY DISCLOSE THE SPECIFIC NATURE OF ANY INTEREST OR INVOLVEMENT THAT MAY RESULT IN A CONFLICT THE PRESIDENT (OR CHAIR OF ANY COMMITTEE OF THE BOARD ENTRUSTED WITH THE MJF OVERSIGHT OF CONFLICTS OF INTEREST) SHALL REPORT TO THE BOARD, AT LEAST ANNUALLY, LISTING ALL CONFLICTS OF INTEREST DISCLOSED TO IT, AND, AT LEAST ANNUALLY, LISTING ALL CONFLICTS OF INTEREST AND IDENTIFYING ALL CONFLICTS THAT WERE WAIVED UNLESS OTHERWISE APPROVED BY THE BOARD, AN INDIVIDUAL WITH A CONFLICT IS REQUIRED TO REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE TRANSACTION ANY PERSON OR PERSONS INVOLVED SHALL NOT VOTE ON SUCH MATTERS AND SHALL NOT BE PRESENT AT THE TIME OF THE VOTE THE CONFLICT OF INTEREST ACTIONS ARE DOCUMENTED IN THE MEETING MINUTES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION OF THE CEO IS SET BY WRITTEN AGREEMENT AND REVIEWED PERIODICALLY BY THE PERSONNEL AND COMPENSATION COMMITTEE OF THE MINNEAPOLIS JEWISH FEDERATION, WHICH CONSIST OF THREE (3) OR MORE INDEPENDENT BOARD MEMBERS. THE COMMITTEE'S PROCESS TO EVALUATE THE COMPENSATION OF THE CEO TAKES INTO ACCOUNT (AMONG OTHER MATTERS) THE COMPENSATION DATA PUBLISHED LOCALLY FOR THE TOP 100 NON-PROFIT ORGANIZATIONS, COMPENSATION DATA FOR SIMILAR SIZED JEWISH FEDERATIONS IN OTHER COMMUNITIES, AND CURRENT ECONOMIC CONDITIONS. THIS PROCESS WAS LAST DONE IN 2015 FOR THE INCOMING CEO. COMPENSATION FOR OTHER OFFICERS IS SET BY THE CHIEF EXECUTIVE OFFICER AND IS REVIEWED WITH THE TREASURER, AN INDEPENDENT BOARD MEMBER. COMPENSATION IS BENCHMARKED PERIODICALLY AGAINST COMPENSATION DATA FOR SIMILAR SIZED JEWISH FEDERATIONS IN OTHER COMMUNITIES. THIS PROCESS WAS LAST DONE IN 2014 FOR THE INCOMING CFO.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE FEDERATION'S ANNUAL REPORT AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE THE FEDERATION'S CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 2,858

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MINNEAPOLIS JEWISH FEDERATION

Employer identification number
41-0693866

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) JEWISH COMMUNITY BUILDING CORPORATION 13100 WAYZATA BOULEVARD 200 MINNETONKA, MN 55305 41-1933056	HOLDING REAL ESTATE TO SUPPORT THE JEWISH COMMUNITY	MN	501(C)(25)	N/A	MINNEAPOLIS JEWISH FEDERATION	Yes	
(2) KELEN FAMILY FOUNDATION 4900 IDS TOWER 80 S EIGHTH STREET MINNEAPOLIS, MN 55402 41-1854293	SUPPORT MINNEAPOLIS JEWISH FEDERATION	MN	501(C)(3)	LINE 11C, III-FI	MINNEAPOLIS JEWISH FEDERATION	Yes	
(3) EFFRESS-MILLER FAMILY FOUNDATION 8545 AVENIDA DE LAS ONDAS LA JOLLA, CA 92037 41-1781993	SUPPORT MINNEAPOLIS JEWISH FEDERATION	MN	501(C)(3)	LINE 11C, III-FI	MINNEAPOLIS JEWISH FEDERATION	Yes	
(4) THE JUDITH AND MICHAEL BERMAN FOUNDATION 13100 WAYZATA BOULEVARD 200 MINNETONKA, MN 55305 26-0181739	SUPPORT MINNEAPOLIS JEWISH FEDERATION	MN	501(C)(3)	LINE 11A, I	MINNEAPOLIS JEWISH FEDERATION	Yes	
(5) OREN AND SHARRON STEINFELDT FOUNDATION 240 BRIDLE LANE HOPKINS, MN 55305 13-4228266	SUPPORT MINNEAPOLIS JEWISH FEDERATION	MN	501(C)(3)	LINE 11C, III-FI	MINNEAPOLIS JEWISH FEDERATION	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership

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

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

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) SPLIT INTEREST TRUSTS (8) 13100 WAYZATA BOULEVARD 200 MINNETONKA, MN 55305	INVESTMENT	MN	MINNEAPOLIS JEWISH FEDERATION	T				Yes	

Part V

Transactions With Related Organizations

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

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

Yes

No

1a

No

1b

Yes

1c

Yes

1d

Yes

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

Yes

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

Yes

1q

Yes

1r

No

1s

No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) JEWISH COMMUNITY BUILDING CORPORATION	K	87,698	CASH TRANSFERRED
(2) OREN AND SHARRON STEINFELDT FOUNDATION	C	210,800	CASH TRANSFERRED

Schedule R (Form 990) 2014

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

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

Part VII

Supplemental Information

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

Return Reference	Explanation
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