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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

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
JEWISH COMMUNITY FOUNDATION
OF ORANGE COUNTY

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1 FEDERATION WAY

City or town, state or province, country, and ZIP or foreign postal code
IRVINE, CA 92603

D Employer identification number
95-3645825

E Telephone number
(949)435-3490

G Gross receipts $ 24,064,905

F Name and address of principal officer
WENDY ARENSON
1 FEDERATION WAY
IRVINE,CA 92603

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW JCFOC ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1981

M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
ACQUIRE, MANAGE, ADMINISTER, AND EXPEND FUNDS FOR CHARITABLE PURPOSES AND TO SUPPORT OTHER 501(C)(3) ORGANIZATIONS

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

Activities & Governance

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	23
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	23
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	**5**	6
6	Total number of volunteers (estimate if necessary)	**6**	23
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	7,210,148	7,123,209
9	Program service revenue (Part VIII, line 2g)	243,632	261,489
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	646,827	1,387,048
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,100,607	8,771,746
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,972,047	5,366,973
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)	374,112	295,458
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,962		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	204,922	481,007
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	5,551,081	6,143,438
19	Revenue less expenses Subtract line 18 from line 12	2,549,526	2,628,308
Net Assets or Fund Balances		**Beginning of Current Year**	**End of Year**
20	Total assets (Part X, line 16)	41,393,403	44,649,646
21	Total liabilities (Part X, line 26)	11,068,427	12,103,242
22	Net assets or fund balances Subtract line 21 from line 20	30,324,976	32,546,404

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

****** 2016-06-27
Signature of officer Date

WENDY ARENSON EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Jennifer Farr	Jennifer Farr			P00743254

Firm's name ▶ Davis Farr LLP — Firm's EIN ▶ 47-3535842
Firm's address ▶ 2301 Dupont Drive Suite 200, Irvine, CA 92612 — Phone no (949) 474-2020

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

At the Jewish Community Foundation of Orange County, we seek to guarantee a Jewish tomorrow through the creation of a culture of legacy within the Orange County Jewish community and by empowering individuals to engage in effective, meaningful giving By planning for the continuation of philanthropy into the future with permanent endowments combined with current giving, we seek to ensure financial resources for the continued vitality of institutions that promote Jewish identity, support a high quality of Jewish life, and benefit the people of Orange County and Jewish communities around the world

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 $ 5,765,917 including grants of $ 5,366,973) (Revenue $ 261,489)

ACQUIRE, MANAGE, ADMINISTER, AND EXPEND FUNDS FOR CHARITABLE PURPOSES INCLUDING ASSISTANCE AND SUPPORT OF OTHER 501(C)(3) ORGANIZATIONS' ASSOCIATIONS AND UNDERTAKINGS

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** ▶ 5,765,917

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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part 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		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *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? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**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? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **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 . .	**1a**	34		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	**1c**		Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	6		
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**			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .	**3b**			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .	**4a**			No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	**5a**			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**			No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**			
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	1a	23		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6			No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		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*	9			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?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ CA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ 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 ▶ WENDY ARENSON 1 FEDERATION WAY IRVINE, CA 92603 (949) 435-3490

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			
(1) GIDEON BERNSTEIN PRESIDENT	5 00	X		X				0	0	0
(2) PAT SZEKEL VICE PRESIDENT AUDITS	3 00	X		X				0	0	0
(3) MICHAEL STOLL VICE PRESIDENT BOARD ADVANCEMENT	3 00	X		X				0	0	0
(4) JON C FEDER VICE PRESIDENT DEFERRED GIFTS	3 00	X		X				0	0	0
(5) SARAH MUSHER BRENNER CO VICE PRESIDENT GRANTS	3 00	X		X				0	0	0
(6) PEGGY FEDER CO VICE PRESIDENT GRANTS	3 00	X		X				0	0	0
(7) JASON ROSIAK VICE PRESIDENT INVESTMENTS	3 00	X		X				0	0	0
(8) CARL KATZ VICE PRESIDENT MARKETING	3 00	X		X				0	0	0
(9) RON BRAND VICE PRESIDENT PERSONNEL	3 00	X		X				0	0	0
(10) SAM WYMAN VP PHILANTHROPIC FUND DEVELOPMENT	3 00	X		X				0	0	0
(11) DAVID B FISHMAN VICE PRESIDENT PLANNING	3 00	X		X				0	0	0
(12) STEVEN FAINBARG SECRETARY	3 00	X		X				0	0	0
(13) ED LEVIN TREASURER	3 00	X		X				0	0	0
(14) GARY BRAHM DIRECTOR	3 00	X						0	0	0

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			
(15) DR GORDON FISHMAN DIRECTOR	3 00	X						0	0	0
(16) RICHARD M GOLLIS DIRECTOR	3 00	X						0	0	0
(17) EDWARD MILLER DIRECTOR	3 00	X						0	0	0
(18) SHAWN MILLER DIRECTOR	3 00	X						0	0	0
(19) RON MORRISON DIRECTOR	3 00	X						0	0	0
(20) JEROME M SCHNEIDER DIRECTOR	3 00	X						0	0	0
(21) LINDA SCHULEIN DIRECTOR	3 00	X						0	0	0
(22) RALPH STERN DIRECTOR	3 00	X						0	0	0
(23) JOHN WOLFSON DIRECTOR	3 00	X						0	0	0
(24) WENDY ARENSON EXECUTIVE DIRECTOR	40 00			X				97,400	0	13,459

1b	**Sub-Total**			
c	**Total from continuation sheets to Part VII, Section A**			
d	**Total (add lines 1b and 1c)**	97,400	0	13,459

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

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		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 . . 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c				
	d	Related organizations . . . 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f 7,123,209				
	g	Noncash contributions included in lines 1a-1f $				
	h	**Total.** Add lines 1a-1f . . . . . ▶	7,123,209			
Program Service Revenue		Business Code				
	2a	FEE INCOME	900099	261,489	261,489		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . . ▶	261,489			
	3	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶	659,346			659,346
	4	Income from investment of tax-exempt bond proceeds . . ▶				
	5	Royalties . . . . . ▶				
		(i) Real / (ii) Personal				
	6a	Gross rents				
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss) . . . . . ▶				
		(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory: 16,020,861				
	b	Less cost or other basis and sales expenses: 15,293,159				
	c	Gain or (loss): 727,702				
	d	Net gain or (loss) . . . . . ▶	727,702			727,702
	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 . . ▶				
Other Revenue		Miscellaneous Revenue / Business Code				
	11a					
	b					
	c					
	d	All other revenue				
	e	**Total.** Add lines 11a–11d . . . . . ▶				
	12	**Total revenue.** See Instructions . . . . . ▶	8,771,746	261,489	0	1,387,048

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	5,366,973	5,366,973		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	97,400	48,700	46,265	2,435
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	130,712	20,703	110,009	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	46,790	24,204	22,238	348
10 Payroll taxes	20,556	5,599	14,778	179
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	64,978	60,884	4,094	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	52,309		52,309	
12 Advertising and promotion	11,216	5,609	5,607	
13 Office expenses	39,185	1,926	37,259	
14 Information technology				
15 Royalties				
16 Occupancy	32,767		32,767	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	25,849	14,083	11,766	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,625		1,625	
23 Insurance	11,341	250	11,091	
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 OPERATING FEE EXPENSES	210,209	210,209		
b REPAIRS AND MAINTENANCE	17,370		17,370	
c OTHER EXPENSES	9,400	4,096	5,304	
d MEALS AND ENTERTAINMENT	4,758	2,681	2,077	
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	6,143,438	5,765,917	374,559	2,962
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) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			1	
	2	Savings and temporary cash investments		6,227,028	2	7,244,454
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		7,144	4	30,312
	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	10a 47,711			
	b	Less accumulated depreciation	10b 42,543	4,302	10c	5,168
	11	Investments—publicly traded securities		35,016,444	11	36,436,318
	12	Investments—other securities See Part IV, line 11			12	48,877
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		138,485	15	884,517
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		41,393,403	16	44,649,646
Liabilities	17	Accounts payable and accrued expenses		20,674	17	20,118
	18	Grants payable		5,000	18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	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		11,042,753	25	12,083,124
	26	**Total liabilities.** Add lines 17 through 25		11,068,427	26	12,103,242
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		11,455,914	27	12,761,891
	28	Temporarily restricted net assets		4,917,424	28	5,829,518
	29	Permanently restricted net assets		13,951,638	29	13,954,995
		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		30,324,976	33	32,546,404
	34	Total liabilities and net assets/fund balances		41,393,403	34	44,649,646

Part XI Reconcilliation 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	8,771,746
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,143,438
3	Revenue less expenses Subtract line 2 from line 1	3	2,628,308
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,324,976
5	Net unrealized gains (losses) on investments	5	-1,633,814
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1,226,934
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	32,546,404

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?	2a		No
	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			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a		No
b	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	3b		

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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

2015

Open to Public Inspection

Name of the organization
JEWISH COMMUNITY FOUNDATION
OF ORANGE COUNTY

Employer identification number
95-3645825

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 (Form 990 or 990-EZ))

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 (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	1,876,626	5,131,482	3,042,640	7,210,148	7,123,209	24,384,105
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	1,876,626	5,131,482	3,042,640	7,210,148	7,123,209	24,384,105
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)						8,487,349
6 **Public support.** Subtract line 5 from line 4						15,896,756

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	1,876,626	5,131,482	3,042,640	7,210,148	7,123,209	24,384,105
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	774,117	432,210	104,729	496,953	2,363,274	4,171,283
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						28,555,388

12 Gross receipts from related activities, etc (see instructions)	12	509,356

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 2015 (line 6, column (f) divided by line 11, column (f))	14	55 670 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	

16a **33 1/3% support test—2015.** 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—2014.** 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—2015.** 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—2014.** 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 III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 2015 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2015.** 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—2014.** 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.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

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).*	1		

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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
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.*	3		

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)

			Yes	No
2	Activities Test **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.*	2a		
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.*	2b		
3	Parent of Supported Organizations **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.*	3a		
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.*	3b		

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other 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) ☐

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

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 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
d From 2013.			
e From 2014.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $ _____			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
c Excess from 2013.			
d From 2014.			
e From 2015.			

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493179004196

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH COMMUNITY FOUNDATION
OF ORANGE COUNTY

Employer identification number
95-3645825

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	362	
2	Aggregate value of contributions to (during year)	11,825,840	
3	Aggregate value of grants from (during year)	8,395,418	
4	Aggregate value at end of year	11,189,720	

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" on 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, handling of violations, and enforcing conservation easements during the year
▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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 on 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 on 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" on 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

		Amount
b	If "Yes," explain the arrangement in Part XIII and complete the following table	
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

		(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	29,336,533	13,387,270	10,742,485	1,055,881	982,384
b	Contributions	6,814,389	2,196,313	1,529,181	9,578,563	49,494
c	Net investment earnings, gains, and losses	-346,583	381,968	1,126,854	117,917	37,661
d	Grants or scholarships	5,657,614	519,328	11,250	9,876	13,658
e	Other expenditures for facilities and programs	19,235				
f	Administrative expenses					
g	End of year balance	30,127,490	15,446,223	13,387,270	10,742,485	1,055,881

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

- a Board designated or quasi-endowment ▶ 36 800 %
- b Permanent endowment ▶ 46 300 %
- c Temporarily restricted endowment ▶ 16 900 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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				
c Leasehold improvements				
d Equipment		31,584	27,869	3,715
e Other		16,127	14,674	1,453
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				5,168

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	
ANNUITY OBLIGATIONS	893,404
DUE TO OTHER ORGANIZATIONS	11,189,720
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	12,083,124

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements			1	7,137,932
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-1,633,814		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	-1,633,814
3	Subtract line **2e** from line **1**			3	8,771,746
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	8,771,746

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

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

1	Total expenses and losses per audited financial statements			1	6,143,438
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	6,143,438
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	6,143,438

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 XIII Supplemental Information *(continued)*

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on 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

2015

Open to Public Inspection

Name of the organization
JEWISH COMMUNITY FOUNDATION
OF ORANGE COUNTY

Employer identification number
95-3645825

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" on 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 . . . . . ▶ 107

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

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

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

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

Return Reference	Explanation
Part I, Line 2	CHARITIES ARE VERIFIED TO DETERMINE IF IT IS A VALID NON-PROFIT ORGANIZATION IT IS DONE THROUGH A THIRD-PARTY WEBSITE SUCH AS GUIDESTAR ORG OR CHARITYNAVIGATOR ORG CHARITY TAX STATUS WILL EXIST IN FIMS ONCE THE CHARITY PROFILE HAS A VALID EIN ENTERED THIS TAX STATUS IS UPDATED AND WILL REFLECT IF A CHARITY HAS LOST ITS NON-PROFIT STATUS IN ADDITION, EACH INDIVIDUAL GRANT IS REVIEWED TO DETERMINE IF THE GRANT REQUEST IS A TAX-DEDUCTIBLE CONTRIBUTION FOR EXAMPLE, REQUESTS FOR FUNDS THAT INVOLVE TICKETS TO AN EVENT ARE DENIED

Additional Data

Software ID:
Software Version:
EIN: 95-3645825
Name: JEWISH COMMUNITY FOUNDATION OF ORANGE COUNTY

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 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
AMELIA EARHART SCHOOL 45250 Dune Palm Drive Indio,CA 92201	46-0732036	501C3	8,000				Steven Fainbarg Donor Advised Philanthropic Fund
AMERICAN ASSOCIATION BEN GURION UNIVERSITY 1001 AVENUE OF THE AMERICAS NEW YORK,NY 10018	23-7270753	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN COMMITTEE FOR THE TEL AVIV YAFO FOUNDATION 1201 Broadway Suite 802 NEW YORK,NY 10001	13-3145161	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund

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AMERICAN COMMITTEE WEISMANN INSTITUTE OF SCIENCE 633 THIRD AVE NEW YORK, NY 10017	13-1623886	501C3	61,601				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN FRIENDS MAGEN DAVID ADOM - NY 352 Seventh Avenue Suite 400 NEW YORK, NY 10001	13-1790719	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN FRIENDS OF REUT INSTITUTE 8282 Wilshire Blvd Suite 400 BEVERLY HILLS, CA 90211	20-3585888	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund

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AMERICAN FRIENDS OF TEL AVIV UNIVERSITY 39 Broadway Suite 1510 NEW YORK, NY 10006	13-1996126	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN FRIENDS OF THE HEBREW UNIVERSITY ONE BATTERY PARK PLAZA NEW YORK, NY 10004	13-1568923	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN JEWISH COMMITTEE - NY 165 E 56TH ST NEW YORK, NY 10021	13-5563393	501C3	10,000				David B Lang & Julia M Gelfand Donor Advised Philanthropic Fund

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AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE 711 Third Avenue NEW YORK, NY 10017	13-1656634	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN SOCIETY FOR PROTECTION OF NATURE IN ISRAEL 28 Arrandale Avenue GREAT NECK, NY 11024	52-1467954	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
AMERICAN TECHNION SOCIETY - NY 55 E 59TH NEW YORK, NY 10022	13-0434195	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund

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ANTI-DEFAMATION LEAGUE 605 Third Avenue NEW YORK, NY 10158	13-2887439	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
ANTI-DEFAMATION LEAGUE - CM 1201 Dove Street NEWPORT BEACH, CA 92660	13-1818723	501C3	5,000				Herman & Henriette Goslins Donor Advised Philanthropic Fund
BETH JACOB CONGREGATION OF IRVINE 3900 MICHELSON IRVINE, CA 92612	33-0262666	501C3	10,000				The Irving & Rochelle Gelman and The Art & Cheri Wilner Kessner Family Donor

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BIG BROTHERS - BIG SISTERS OF THE DESERT 42-600 COOK ST 110 PALM DESERT,CA 92211	33-0683335	501C3	5,000				Steven Fainbarg Donor Advised Philanthropic Fund
BIRTHRIGHT ISRAEL FOUNDATION 33 E 33rd Street 7th Floor NEW YORK,NY 10016	13-4092050	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
BROWN UNIVERSITY PO BOX 1877 PROVIDENCE,RI 02912	05-0258809	501C3	15,000				Adam L Buchsbaum & Mary F Fernandez Donor Advised Philanthropic Fund

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CALIFORNIA STATE PARKS FOUNDATION 50 FRANCISCO ST SUITE 110 SAN FRANCISCO,CA 94133	94-1707583	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund
CENTER THEATRE GROUP Ahmanson Theatre/Mark Taper Forum 601 W Temple LOS ANGELES,CA 90012	95-2466183	501C3	10,000				Joan Kroll Donor Advised Philanthropic Fund
CHABAD OF IRVINE 5010 BARRANCA PARKWAY IRVINE,CA 92604	33-0886313	501C3	68,720				LINDA AND ORY SCHWARTZ FAMILY CHARITABLE DONOR ADVISED PHILANTHROPIC FUND

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CHABAD OF NEWPORT 2240 UNIVERSITY DR NEWPORT BEACH,CA 92660	20-0083565	501C3	110,000				THE STEVEN FAINBARG AND THE NEVO-HACOHEN & SCHENKER FAMILY DONOR ADVISED FUN
CHABAD OF SHERMAN OAKS 14960 VENTURA BOULEVARD SHERMAN OAKS,CA 914033455	46-2307862	501C3	6,500				LINDA AND ORY SCHWARTZ FAMILY CHARITABLE DONOR ADVISED PHILANTHROPIC FUND
CHAPMAN UNIVERSITY 1 UNIVERSITY DRIVE ORANGE,CA 92866	95-1643992	501C3	140,800				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND

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CHILDREN'S HOSPITAL OF ORANGE COUNTY FOUNDATION 1201 WEST LA VETA ORANGE,CA 92868	95-6097416	501C3	130,495				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND
CHILDREN'S HOSPITAL OF ORANGE COUNTY 1201 WEST LA VETA ORANGE,CA 92868	95-2321786	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
COMMUNITY FOUNDATION OF WESTERN NEVADA 1885 SOUTH ARLINGTON AVENUE 103 RENO,NV 89509	88-0370179	501C3	15,000				DR MICHEAL & JOAN POKROY FAMILY DONOR ADVISED PHILANTHROPIC FUND

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CONGREGATION B'NAI ISRAEL 2111 BRYAN AVE TUSTIN,CA 92782	95-3680172	501C3	88,400				THE RUTH & ARNOLD FEUERSTEIN SUPPORT AND THE STERN FAMILY DONOR ADVISED PHIL
CONGREGATION OR HADASH - GA 7460 TROWBRIDGE ROAD SANDY SPRINGS,GA 30328	06-1690352	501C3	5,000				GAIL & BRUCE DUNER DONOR ADVISED PHILANTHROPIC FUNDS
CONGREGATION SHIR HA-MA'A LOT 3652 MICHELSON DR IRVINE,CA 92612	95-2559118	501C3	5,215				SCHULEIN FAMILY DONOR ADVISED PHILANTHROPIC FUNDS

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DOCTORS WITHOUT BORDERS - NY 333 SEVENTH ST NEW YORK,NY 10001	13-3433452	501C3	61,601				Isidore C & Penny W Myers Foundation Endowment Fund
FAMILIES FORWARD 8 THOMAS IRVINE,CA 92618	33-0086043	501C3	21,000				Steven Fainbarg Donor Advised Philanthropic Fund
FISHER HOUSE FOUNDATION 111 ROCKVILLE PIKE SUITE 420 ROCKVILLE,MD 20850	11-3158401	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund

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FRIENDS OF ARAVA INSTITUTE TRANSBOUNDRY WATER MANAGEMENT 896 BEACON STREET BOSTON,MA 02215	11-3485736	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
FRIENDS OF CHABAD OF HEBRON 5 HUTTON CENTER SANTA ANA,CA 92707	26-1592721	501C3	16,300				LINDA AND ORY SCHWARTZ FAMILY CHARITABLE DONOR ADVISED PHILANTHROPIC FUND
FRIENDS OF ETHIOPIAN JEWS PO BOX 960059 BOSTON,MA 02196	06-1512486	501C3	5,000				HOWARD & SYLVIA LENHOFF FAMILY DONOR ADVISED PHILANTHROPIC FUND

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FRIENDS OF ISRAEL DEFENSE FORCES - NY 1430 BROADWAY SUITE 1301 NEW YORK, NY 10018	13-3156445	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund
FRIENDS OF ORANGE COAST INTERFAITH SHELTER PO BOX 234 CORONA DEL MAR, CA 92625	95-3163254	501C3	40,800				ZANE & DOROTHY L LESHNER DONOR ADVISED PHILANTHROPIC FUND AND THE ISIDORE C
FRIENDS OF THE FORUM 501 N CLINTON SUITE 903 CHICAGO, IL 60654	20-8943695	501C3	5,000				IRVING & NANCY CHASE DONOR ADVISED PHILANTHROPIC FUND

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FRIENDSHIP CIRCLE 2240 UNIVERSITY DR NEWPORT BEACH,CA 92612	11-3797166	501C3	5,000				JEREMY & MISSY MANDEL FUND FOR DEVELOPMENTALLY DISABLED
FUEL FREEDOM FOUNDATION 18100 VON KARMAN SUITE 870 IRVINE,CA 92612	45-3201801	501C3	250,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND
GOODWILL INDUSTRIES OF ORANGE COUNTY 410 N FAIRVIEW SANTA ANA,CA 92703	95-1644018	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund

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HEBREW ACADEMY 14401 WILLOW LN HUNTINGTON BEACH, CA 92647	33-0019197	501C3	27,450				LINDA AND ORY SCHWARTZ FAMILY CHARITABLE DONOR ADVISED PHILANTHROPIC FUND
HEBREW IMMIGRANT AID SOCIETY 216 W JACKSON BLVD SUITE 700 CHICAGO, IL 60606	36-2167094	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
HERITAGE POINTE 26356 BELLOGENTE MISSION VIEJO, CA 92691	33-0260314	501C3	840,772				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS

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HILLEL FOUNDATION OF ORANGE COUNTY 8502 E CHAPMAN AVE ORANGE,CA 92869	23-7172024	501C3	20,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND
HOAG HOSPITAL FOUNDATION 500 SUPERIOR AVENUE SUITE 350 NEWPORT BEACH,CA 92663	95-3222343	501C3	20,000				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS
HOAG HOSPITAL FOUNDATION 330 PLACENTIA AVENUE SUITE 100 NEWPORT BEACH,CA 926633315	95-3222343	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund

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JEWISH COMMUNITY CENTER OF GREATER ORLANDO 851 N MAITLAND AVENUE MAITLAND,FL 32751	23-7448234	501C3	10,000				LINDA AND ORY SCHWARTZ FAMILY CHARITABLE DONOR ADVISED PHILANTHROPIC FUND
JEWISH COMMUNITY CENTER OF ORANGE COUNTY 1 FEDERATION WAY IRVINE,CA 92603	33-0016661	501C3	222,261				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS
JEWISH FAMILY SERVICES OF METROWEST 475 FRANKLIN STREET SUITE 101 FRAMINGHAM,MA 01702	04-2730898	501C3	5,500				DAVID MILOWE & GAIL NUZZI MILOWE DONOR ADVISED PHILANTHROPIC FUND

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JEWISH FEDERATION AND FAMILY SERVICES 1 FEDERATION WAY SUITE 210 IRVINE,CA 92603	95-2407026	501C3	1,078,634				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS
JEWISH FEDERATION LAS VEGAS 2317 RENAISSANCE DRIVE LAS VEGAS,NV 89119	88-0098500	501C3	9,000				GLENN M GELMAN MEMORIAL DONOR ADVISED PHILANTHROPIC FUNDS
JEWISH FEDERATION OF LOS ANGELES 6505 WILSHIRE SUITE 1000 LOS ANGELES,CA 90048	95-6111928	501C3	11,000				THE SUSAN LERNER FOUNDATION AND THE BERNARD & JOHANNA K LEMLECH DONOR ADVIS

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JEWISH WAR VETERANS OF THE USA 1811 R ST NW WASHINGTON,DC 20009	53-0226294	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
LOS ANGELES HIGH SCHOOL 4850 W OLYMPIC BLVD LOS ANGELES,CA 90019	23-7048953	501C3	6,000				JEWISH PHILANTHROPIC FUND OF ELLEN & MARSHALL COLE
MERAGE JEWISH COMMUNITY CENTER OF ORANGE COUNTY ONE FEDERATION WAY SUITE 200 IRVINE,CA 92603	33-0016661	501C3	5,000				NEVO-HACOHEN & SCHENKER FAMILY DONOR ADVISED PHILANTHROPIC FUND

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MIND RESEARCH INSTITUTE 111 ACADEMY SUITE 100 IRVINE,CA 92617	33-0798804	501C3	50,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND
MIRACLE BABIES 8745 AERO DRIVE SUITE 111 SAN DIEGO,CA 92123	71-1001702	501C3	5,000				LANCE & MORGAN STERN DONOR ADVISED ENDOWMENT FUND
MOVEMENT DISORDERS PROGRAM 333 CITY BOULEVARD WEST SUITE 605 ORANGE,CA 92868	95-2540117	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund

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NA'AMAT USA 21515 VANOWEN SUITE 102 CANOGA PARK,CA 91303	13-5590516	501C3	40,000				ALLAN & SANDY FAINBARG NA-AMAT USA DONOR ADVISED PHILANTHROPIC FUND
NATIONAL JEWISH HEALTH PO BOX 17169 DENVER,CO 802170169	74-2044647	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund
NEWPORT BEACH PUBLIC LIBRARY FOUNDATION 1000 AVOCADO AVE NEWPORT BEACH,CA 92660	95-6113643	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund

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OPEN PATHS COUNSELING CENTER 5731 W SLAUSON SUITE 175 CULVER CITY,CA 90230	95-3221061	501C3	10,000				JEWISH PHILANTHROPIC FUND OF ELLEN & MARSHALL COLE
ORANGE COAST COLLEGE FOUNDATION PO BOX 5005 COSTA MESA,CA 92626	33-0071349	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
ORANGE COAST INTERFAITH SHELTER 17972 SKYPARK CIRCLE BUILDING 47 SUITE E IRVINE,CA 92614	95-3163254	501C3	5,000				SCHULEIN FAMILY DONOR ADVISED PHILANTHROPIC FUNDS

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ORANGE COUNTY BUREAU OF JEWISH EDUCATION 1 FEDERATION WAY SUITE 205 IRVINE,CA 92603	95-3740563	501C3	112,610				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS
ORANGE COUNTY MUSEUM OF ARTS - VISIONARIES 4607 CAMDEN DRIVE CORONA DEL MAR,CA 92625	95-1660847	501C3	17,500				DIANA AND JAY MOSS FOUNDATION DONOR ADVISED PHILANTHROPIC FUND
ORANGE COUNTY SCHOOL OF ARTS (OCSA) 1010 N MAIN ST SANTA ANA,CA 92701	33-0891574	501C3	12,500				STUART & SUSANNA WOLFE FAMILY DONOR ADVISED PHILANTHROPIC FUND

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ORANGE COUNTY SCHOOL OF THE ARTS FOUNDATION 1010 N MAIN ST SANTA ANA,CA 92701	33-0377341	501C3	12,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND
ORANGE COUNTY UNITED WAY 18012 MITCHELL SOUTH IRVINE,CA 92614	33-0047994	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund
ORANGEWOOD CHILDREN'S FOUNDATION 1575 EAST 17TH STREET SANTA ANA,CA 92705	95-3616628	501C3	5,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND

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ORT AMERICA - LOS ANGELES 6435 WILSHIRE BLVD SUITE 305 LOS ANGELES,CA 15400	13-5562424	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
PACIFIC SYMPHONY 3631 S HARBOR BLVD SUITE 100 SANTA ANA,CA 92704	95-3635496	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
PACIFIC SYMPHONY YOUTH ORCHESTRA 3631 S HARBOR BLVD SUITE 100 SANTA ANA,CA 92704	95-3635496	501C3	5,000				HENRY K & MERYL J SCHRIMMER DONOR ADVISED PHILANTRHOPIC FUND

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PHILHARMONIC SOCIETY OF ORANGE COUNTY 2082 BUSINESS CENTER DR SUITE 100 IRVINE,CA 92612	95-1805452	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
ROHR CHABAD CENTER UNIVERSITY OF COLORADO AT BOULDER 909 14TH STREET BOULDER,CO 80302	20-2853143	501C3	5,000				LEVIN & LAUERLEVIN FAMILY DONOR ADVISED PHILANTHROPIC FUND
SAGE HILL SCHOOL 20402 NEWPORT COAST DRIVE NEWPORT COAST,NV 92657	33-0729698	501C3	5,000				JULIE & DAVID FISHMAN DONOR ADVISED PHILANTHROPIC FUND

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SANTA ANA COLLEGE FOUNDATION 530 W 17TH ST SANTA ANA,CA 92706	95-6209198	501C3	25,000				Steven Fainbarg Donor Advised Philanthropic Fund
SAVE OUR YOUTH 661 HAMILTON ST COSTA MESA,CA 92627	33-0585600	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund
SEGERSTROM CENTER FOR THE ARTS 600 TOWN CENTER COSTA MESA,CA 92626	23-7287150	501C3	5,000				HENRY K & MERYL J SCHRIMMER DONOR ADVISED PHILANTRHOPIC FUND

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

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SHARE OUR SELVES 1550 SUPERIOR AVENUE COSTA MESA,CA 92627	95-3222316	501C3	15,400				Isidore C & Penny W Myers Foundation Endowment Fund
SIERRA CLUB FOUNDATION 85 SECOND ST SUITE 750 SAN FRANCISCO,CA 94105	94-6096990	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund
ST JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 1999 MEMPHIS,TN 381019795	62-0646012	501C3	5,000				RICHARD & ANDREA MANDEL DONOR ADVISED PHILANTHROPIC FUND

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TARBUT V'TORAH 5 FEDERATION WAY IRVINE,CA 92603	95-3374189	501C3	18,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND
TARBUT V'TORAH COMMUNITY DAY SCHOOL 5 FEDERATION WAY IRVINE,CA 92603	95-3374189	501C3	61,200				Isidore C & Penny W Myers Foundation Endowment Fund
TEMPLE BAT YAHM 1011 CAMELBACK ST NEWPORT BEACH,CA 92660	95-2875578	501C3	45,259				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS

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TEMPLE BETH AM 10395 S LA CIENEGA LOS ANGELES,CA 90035	95-1656370	501C3	7,350				GENIA & WARREN RICHARD FOUNDATION DONOR ADVISED PHILANTHROPIC FUND
TEMPLE BETH ISRAEL 3033 NORTH TOWNE AVENUE POMONA,CA 91767	95-2111157	501C3	5,900				MYRA E OR LOUIS J WIENER DONOR ADVISED PHILANTHROPIC FUND
TEMPLE BETH SHOLOM 2625 N TUSTIN SANTA ANA,CA 92705	95-2263896	501C3	64,318				AWARDED BY MULTIPLE DONOR ADVISED PHILANTHROPIC FUNDS

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TEMPLE B'NAI OR 60 OVERLOOK RD MORRISON,NJ 07960	22-2780500	501C3	6,500				Adam L Buchsbaum & Mary F Fernandez Donor Advised Philanthropic Fund
TEMPLE ISAIAH 10345 W PICO BL LOS ANGELES,CA 90064	95-1269131	501C3	6,000				JEWISH PHILANTHROPIC FUND OF ELLEN & MARSHALL COLE
THE ORANGE COUNTY FRIENDSHIP CIRCLE 2240 UNIVERSITY DR NEWPORT BEACH,CA 92660	11-3797166	501C3	25,000				RICHARD & ANDREA MANDEL DONOR ADVISED PHILANTHROPIC FUND

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UC BERKELEY FOUNDATION 195 HAAS PAVILION 4422 BERKELEY,CA 947204422	94-6090626	501C3	5,208				DAVID & GERALDINE SANDOR DONOR ADVISED PHILANTHROPIC FUND
UC REGENTS 1111 FRANKLIN STREET 12TH FLOOR OAKLAND,CA 94607	94-6036494	501C3	26,000				RABBI ALLEN KRAUSE MEMORIAL SCHOLARSHIP
UCI FOUNDATION (HEALTH) 100 THEORY SUITE 250 IRVINE,CA 92617	95-2540117	501C3	250,000				STERN FAMILY DONOR ADVISED PHILANTHROPIC FUND

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UCI FOUNDATION - MELANOMA FUND 3501 333 CITY BOULEVARD WEST SUITE 605 ORANGE,CA 92868	95-2540117	501C3	10,000				HENRY K & MERYL J SCHRIMMER DONOR ADVISED PHILANTRHOPIC FUND
UCLA FOUNDATION FOR SEMMEL INSTITUTE 760 WESTWOOD PLAZA 57-440 LOS ANGELES,CA 90095	95-2250870	501C3	7,500				SUSAN LERNER FOUNDATION DONOR ADVISED PHILANTHROPIC FUND
UNIVERSITY OF CALIFORNIA IRVINE CLLAIRE TREVOR SCHOOL OF THE ARTS UC DRAMA DEPT IRVINE,CA 926972775	95-2226406	501C3	25,000				Isidore C & Penny W Myers Foundation Endowment Fund

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UNIVERSITY SYNAGOGUE 3400 MICHELSON DR IRVINE,CA 92612	23-3649498	501C3	10,189				IRV & NEIL HOWARD LIBRARY SPECIAL FUND
USC - NORRIS CANCER CENTER 1420 SAN PABLO STREET A-302 LOS ANGELES,CA 900331042	95-1642394	501C3	10,000				Steven Fainbarg Donor Advised Philanthropic Fund
WOMEN'S ZIONIST ORGANIZATION OF AMERICA 50 WEST 58TH STREET NEW YORK,NY 100192500	13-1656651	501C3	46,200				Isidore C & Penny W Myers Foundation Endowment Fund

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WOODROW WILSON HIGH SCHOOL 4500 MULTNOMAH ST LOS ANGELES,CA 90032	95-1661117	501C3	9,000				JEWISH PHILANTHROPIC FUND OF ELLEN & MARSHALL COLE
WOODWARD ACADEMY 1662 RUGBY AVE COLLEGE PARK,GA 30337	58-0625584	501C3	5,000				BOXER FAMILY DONOR ADVISED PHILANTHROPIC FUND
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON,DC 20090	52-1693387	501C3	30,800				Isidore C & Penny W Myers Foundation Endowment Fund

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YMCA OF THE DESERT 43-900 SAN PABLO PALM DESERT,CA 92260	95-3673295	501C3	5,000				Steven Fainbarg Donor Advised Philanthropic Fund
YALE UNIVERSITY PO BOX 2038 NEW HAVEN,CT 065212038	06-0646973	501C3	7,700				NEVO-HACOHEN & SCHENKER FAMILY DONOR ADVISED PHILANTHROPIC FUND

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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

2015

Open to Public Inspection

Name of the organization	Employer identification number
JEWISH COMMUNITY FOUNDATION OF ORANGE COUNTY	95-3645825

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 2	BOARD MEMBERS JON FEDER AND PEGGY FEDER HAVE A FAMILY RELATIONSHIP
Form 990, Part VI, Section B, line 11	MANAGEMENT REVIEWS THE 990 ALL MEMBERS OF THE BOARD RECEIVE A COPY PRIOR TO FILING
Form 990, Part VI, Section B, line 12c	Statement of Certain Transactions As part of the annual report, or as a separate document if no annual report is issued, the corporation shall within one hundred twenty (120) days after the end of the corporation's fiscal year, annually prepare and mail to each Directo r a statement of any transaction or indemnification of the following kind (a) Any transac tion (i) in which the corporation, or its parent or subsidiary, was party, (ii) in which a n "interested person" had a direct or indirect material financial interest, and (iii) whic h involved more than $50,000 or was one of several transactions with the same interested p erson involving, in the aggregate, more than $50,000 For this purpose, an "interested per son" is either (i) Any Director or officer of the corporation, its parent, or subsidiary, or (ii) Any holder of more than ten percent (10%) of the voting power of the corporation, its parent, or its subsidiary The statement shall include a brief description of the tran saction, the names of the interested persons involved, their relationship to the corporati on, the nature of their interest in the transaction, and, if practicable, the amount of th at interest, provided that if the transaction was with a partnership in which the interest ed person is partner, only the interest of the partnership need be stated (b) Any indemni fications or advances aggregating more than $10,000 paid during the fiscal year to any off icer or Director of the corporation under these Bylaws, unless that indemnification has al ready been approved by the Directors in accordance with these Bylaws
Form 990, Part VI, Section B, line 15	THE PERSONNEL HR COMMITTEE OF THE BOARD REVIEWS SALARY RANGES AND BENEFITS, THEN PROVIDES RECOMMENDATIONS TO THE FINANCE COMMITTEE THE FINANCE COMMITTEE REVIEWS IT AND RECOMMENDS IT AS PART OF THE BUDGET THE BOARD APPROVES THE BUDGET The Board, or any authorized comm ittee of the Board, shall review and approve the compensation, including benefits, of the President, the Treasurer and the Chief Financial Officer, if any, to ensure that each such officer's compensation is just and reasonable Such review and approval shall occur when the officer is initially hired, whenever the officer's term of employment is renewed or ex tended, and when the officer's compensation is modified, unless such modification applies to substantially all employees
Form 990, Part VI, Section C, line 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORMS 990, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
FORM 990 PART XII LINE 2C	THE AUDIT OVERSIGHT PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR