DLN: 93493195011057

## 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 <u>www IRS gov/foim990</u>

2015

Open to Public Inspection

A F	or the	2015 ca	lendar year, or tax year beg	inning 09-01-2015 , and ending 08-31-20	16			
	ddress c	-	C Name of organization JEWISH FEDERATION OF GREA PHILADELPHIA	JER			o <b>yer id</b> 50008	entification number 35
_	ame cha nitial reti	-	Doing business as					
`	inal /termina nended		Number and street (or P O bo 2100 ARCH STREET	x if mail is not delivered to street address) Room/si	uite	E Teleph	none nur	
		n pending	City or town, state or province PHILADELPHIA, PA 19103	, country, and ZIP or foreign postal code			-	s \$ 33,490,786
			<b>F</b> Name and address of pr NAOMILADLER ESQ	incipal officer	1	this a grou bordinates		n for
			2100 ARCH STREET PHILADELPHIA,PA 191	03	l N	lo		1 1
<b>T</b> a	x-exem	npt status	<b>√</b> 501(c)(3)			e all subord cluded?	iinates	□Yes □ No
ı w	ebsite	e: ► WW	VW JEWISHPHILLY ORG			•		(see instructions)
<b>K</b> For	m of org	ganızatıon	Corporation Trust A	ssociation		roup exemp f formation 1		umber <b>&gt;</b> ¶ State of legal domicile PA
Do	rt I	·						
Pe			imary	ssion or most significant activities				
				NDIVIDUALS TO CARE FOR, CONVENE	AND ENRI	CH OUR JE	WISH	COMMUNITIES
eu								
2								
<u> </u>	_							
<u>.</u>	2 (	Check th	nis box 🕨 🥅 if the organization	on discontinued its operations or disposed	of more tha	ın 25% of ıt	s net a	assets
Governance				- · · · · · · · · · · · · · · · · · · ·				
	3 1	Number	of voting members of the gov	verning body (Part VI, line 1a)			3	22
Activities &	4 1	Number	of independent voting memb	ers of the governing body (Part VI, line 1b)	)		4	21
Ě	5 T	otal nur	mber of individuals employed	d in calendar year 2015 (Part V, line 2a)			5	117
=    -	6 T	otal nur	mber of volunteers (estimate	e if necessary)			6	2,000
4	7a ⊺	otal uni	related business revenue fro	m Part VIII, column (C), line 12			7a	571,732
	b N	et unrela	ated business taxable incom	ie from Form 990-T, line 34			7b	570,732
				, , , , , , , , , , , , , , , , , , ,		rior Year		Current Year
	8	Contr	ibutions and grants (Part VI	II, line 1h)		29,507	.909	25,180,665
ġ.	9		am service revenue (Part VI	,	0	. , ,		
Ravenua	10	_	tment income (Part VIII, co	,034	4,775,687			
Ş.	11			(A), lines 5, 6d, 8c, 9c, 10c, and 11e)	,978	-119,383		
	12		,	h 11 (must equal Part VIII, column (A), lir	ne 💳			·
		12)		, , , , , , , , , , , , , , , , , , , ,		37,508	,965	29,836,969
	13	Grant	s and sımılar amounts paıd (	Part IX, column (A), lines 1-3)		21,897	,792	18,637,657
	14	Benef	its paid to or for members (P	art IX, column (A), line 4)			0	0
£	15	Saları 5–10		ployee benefits (Part IX, column (A), lines		8,135	,294	8,301,381
Expenses	16a	Profe	ssional fundraising fees (Par	t IX, column (A), line 11e)		75	,022	61,914
χĎ	ь	Total fu	undraising expenses (Part IX, colun	nn (D), line 25) ▶5,007,450				
ш	17		- · · · ·	(A), lines 11a-11d, 11f-24e)		7,153	,740	7,791,376
	18			(must equal Part IX, column (A), line 25)		37,261		34,792,328
	19		•	line 18 from line 12		247	,117	-4,955,359
Net Assets or Fund Balances			·		Beginnin	g of Current	Year	End of Year
ssei 3afa	20	Total	assets (Part X, line 16) .			295,262	,348	300,527,562
Z Z	21	Total	liabilities (Part X, line 26)			104,926	,849	102,768,746
žΞ	22	Netas	ssets or fund balances Subt	ract line 21 from line 20		190,335	,499	197,758,816
Pai	rt II	Sign	nature Block					
ny k	nowled	dge and		e examıned thıs return, ıncludıng accompaı I complete Declaratıon of preparer (other t				
		***	k* * K			2017-07-06		
Sigr	1	Sign	ature of officer			Date		
Her		NAO	MI L ADLER ESQ PRESIDENT & CEO					
			e or print name and title					
			Print/Type preparer's name		Date	Check I if	PTIN	7226
Paid	d	Ľ	LYNNE JOHNSON	LYNNE JOHNSON	:	self-employed		57336
	pare	r ⊢	Firm's name FRSM US LLP			Fırm's EIN 🟲 🕯	12-0714	325
	On	1 1	Firm's address > 751 ARBOR WAY S	SUITE 200	[1	Phone no (21	5) 641-	8600
J 30	. • • • • •	٠,	BLUE BELL, PA 19	9422				

. √Yes No

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	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, Pait 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, Pait 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)			
а	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,	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	<b>28</b> c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M $3$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part $I$ .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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	<b>Statements</b>	Regarding	Other IRS	Filings and	d Tax Comp	liance
--------	-------------------	-----------	-----------	-------------	------------	--------

<u> </u>	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u> .		. 🗸
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 69			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	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			
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	
Ва	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶CJ, BD, VI 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
•	2. 1. 25, 15 mile 54 of 55, 414 the organization me form 6000 ft. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			1
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?	<b>7</b> g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
3	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
)a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
)	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		I No
	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.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 22			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 21			
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	<b>10</b> a		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		
L1a	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			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12</b> a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
L5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	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)			
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16</b> a		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?	<b>16</b> b		
Se	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed▶			
L8	PA, NY, NJ, FL, CA  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 record ▶JEROME P NACHLIS CFO & CAO 2100 ARCH STREET PHILADELPHIA, PA 19103 (215) 832-0807	s		

### 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) A verage hours per week (list any hours for related organizations below dotted line)	more t	tion i han d on is	ne l both	oox, an d	officer stee)	Former	(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
See Additional Data Table										
			_							
-										
	1									
	-									
	1	I					_			Form <b>990</b> (2015)

MAYTAV BUS COMPANY

1512 GRIFFITH STREET PHILADELPHIA, PA 19111

\$100,000 of compensation from the organization  $\triangleright$  4

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

<b>(A)</b> Name and Title		(B) Average hours per week (list any hours	more t	than on is	one both	not d box, n an	heck unles officer istee)		Repo compe fron organiza	D) rtable nsation n the ation (W-	(E) Reportable compensation from related organizations (V	٧-	(F) Estima amount o compens from	ated If other Sation the
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099	O-MISC)	2/1099-MISC			ion and ed ations
See	Additional Data Table	+						$\vdash$				+		
		1			_	-		-				+		
												$\bot$		
												+		
												+		
					-	-						+		
						-		-				4		
												$\perp$		
1b	Sub-Total		٠	٠.	<del>'</del> -		. ▶		1		1	╧		
c	Total from continuation sheet						. 🟲		1.00	1 150		lacksquare		101 202
d	Total (add lines 1b and 1c) .									51,458	0	<u></u>		181,202
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) w	ho receive	ed more th	nan			
													Yes	No
3	Did the organization list any <b>f</b> oon line 1a? <i>If "Yes," complete S</i>					key •	emple	yee, •	, or highes	t compen	sated employee	3	Yes	
4	For any individual listed on lin organization and related organ	e 1a, is the sum	of repo	rtabl	есо							3	165	
	ındıvıdual				•	•						4	Yes	
5	Did any person listed on line 1 services rendered to the organ									ganızatıon	or individual for			
	services rendered to the organ	nzacion ii res,	compre		nca	iic j	101 34	n pc	.13011			5		No
S	ection B. Independent Co	ntractors												
1	Complete this table for your fire compensation from the organization												tav vear	
		(A)		ation	101	tile (	aieiiu	ai ye	ar enumy		(B)	10113	(C	:)
REN		Name and business	address								scription of services NT ADMINISTRATIVE		Compe	nsation 261,047
	PURDUE ROAD SUITE 500									SRVCS				
INDL	ANAPOLIS, IN 46268 ASSOCIATES									INVESTME	NT CONSULTING			199,969
	GALLERIA PARKWAY SUITE 1800									TIANES IN E	41 CONSOLITING			199,509
ATLA	NTA, GA 30339									DUT DE L	5464DE 252455	ightharpoonup		100 : :
	PH DUGAN INC									BUILDING	FACADE REPAIRS			193,162
	BETHLEHEM PIKE ENHIEM, PA 19038													

2 Total number of independent contractors (including but not limited to those listed above) who received more than

112,443

TRANSPORTATION SERVICES

Part V	/	Statement o	f Revenue					
			ule O contains a respor	se or note to any lin	ne in this Part VIII	<u></u>		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w &	1a	Federated cam	paigns 1a	206,164				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es <b>1b</b>					
Gr.	c	Fundraising eve	ents <b>1c</b>					
ifts. ar A	d	Related organiz	ations 1d					
<u>n</u> .G	e	Government grants	s (contributions) <b>1e</b>					
ons Si	l f	All other contribution	ons, gifts, grants, and <b>1f</b>	24,974,501	ŀ			
her jag	'	sımılar amounts no	t included above		ļ			
	g	Noncash contribute 1a-1f \$	ons included in lines	2,961,937				
Containe	h	Total. Add lines	s 1a-1f		25,180,665			
				Business Code				
Program Service Revenue	2a							
₹ •	Ь							
٥٤	C							
Ser.	d							
am	e							
ľogi	f	All other progra	im service revenue					
<u>~</u>	g		s 2a-2f					
	3		ome (including dividend ar amounts)		3,559,937			3,559,937
	4	Income from inves	tment of tax-exempt bond p	proceeds ►				
	5	Royalties		•				
		Cross rents	(ı) Real 3,202,048	(II) Personal				
	6a	Gross rents						
	Ь	Less rental expenses	3,653,817					
	C	Rental income or (loss)	-451,769					
	d	Net rental inco	me or (loss)		-451,769	-1,047,705	595,936	
		Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	1,215,750					
	ь	Less cost or other basis and sales expenses	0					
	c	Gain or (loss)	1,215,750					
	d		s)	· · · ·•	1,215,750			1,215,750
une	8a	Gross income f events (not inc	luding					
Other Revenue		of contributions See Part IV, lin	reported on line 1c)					
the the	ь	Less direct ex	penses b					
0	c		loss) from fundraising (	events <b>&gt;</b>				
	9a	Gross income f See Part IV , lin	rom gaming activities le 19 a					
	b	Less direct ex	penses b					
	C	Net income or (	loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	wances .					
	h	Less costofa	a pods sold b					
	1		loss) from sales of inve	entory ▶				
		Miscellaneous		Business Code				
	11a	MISCELLANEC	ous	900099	356,590			356,590
	ь	INVESTMENT PARTNERSHI	INCOME FROM	900099	-24,204		-24,204	
	d	All other reven	ue		+			
	e		s 11a-11d	•	22			
	12		See Instructions		332,386 29,836,969	-1,047,705	571,732	5,132,277

Form 990 (2015) Page **10** 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 . . . . . . . . . . . . (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . . 18,452,440 18,452,440 Grants and other assistance to domestic individuals See Part IV, line 22 . 185,217 185,217 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 . . . . . . . . . . . . . Benefits paid to or for members . . . . Compensation of current officers, directors, trustees, and 1,435,619 503,979 371,288 560,352 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 5,519,792 2,021,465 1,097,238 2,401,089 Pension plan accruals and contributions (include section 401(k) 261.972 83,904 71.389 106.679 and 403(b) employer contributions) . . . . 9 Other employee benefits . . . . . . 677,926 193,383 161,129 323.414 10 Payroll taxes 406,072 141,060 92,170 172,842 . . . . . . . . . . . 11 Fees for services (non-employees) 707,851 706,159 1,692 Management . . . . 131,162 26,868 102,895 1,399 Legal . . . . . . . Accounting . . . . . . . . . . . . 66,353 66,353 Lobbying . . . . . . . . . . 41,737 41,737 d 61,914 Professional fundraising services See Part IV, line 17 61,914 Investment management fees . . . . . 277,138 38,476 238.662 Other (If line 11g amount exceeds 10% of line 25, column (A) 399.394 318.007 amount, list line 11g expenses on Schedule O) . . . . 36.433 44,954 12 Advertising and promotion . . . 131,127 10,294 10,029 110,804 13 Office expenses . . . . . 364,530 89,426 199,476 75,628 14 Information technology . . 213.719 43.758 140.458 29,503 15 Royalties . . Occupancy . . . . . . 16 1,939,042 1,659,101 27,157 252,784 17 Travel . . . . . . . . . . . . 145,770 33,744 24,825 87,201 Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			· · · · <u>· · </u>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	133,777	1	73,204
	2	Savings and temporary cash investments	168,042	2	345,535
	3	Pledges and grants receivable, net	5,418,438	3	4,039,100
	4	Accounts receivable, net	2,516,282	4	2,484,596
	5	Loans and other receivables from current and former officers, directors,	_,,	- 1	
		trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
				5	
Assets	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	234,206	9	394.255
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  58,225,934	20 1,200		
	ь	Less accumulated depreciation 10b 23,320,861	36,050,881	<b>10</b> c	34,905,073
	11	Investments—publicly traded securities	192,685,166	11	206,039,109
	12	Investments—other securities See Part IV, line 11	24,242,167	12	24,015,703
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	33,813,389	15	28,230,987
	16	Total assets.Add lines 1 through 15 (must equal line 34)	295,262,348	16	300,527,562
	17	Accounts payable and accrued expenses	6,167,310	17	6,689,793
	18	Grants payable	15,548,901	18	9,015,244
	19	Deferred revenue	284,606	19	312,601
	20	Tax-exempt bond liabilities	26,780,000	20	26,660,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
abilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Ē		persons Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	12,331,067	23	12,045,100
	24	Unsecured notes and loans payable to unrelated third parties	1,600,000	24	2,330,000
	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			
			42,214,965	25	45,716,008
	26	Total liabilities.Add lines 17 through 25	104,926,849	26	102,768,746
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶			
<u>la</u>	27	Unrestricted net assets	96,043,885	27	98,558,282
മ്	28	Temporarily restricted net assets	54,939,310	28	58,599,944
Ξ.	29	Permanently restricted net assets	39,352,304	29	40,600,590
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
əts	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
¥	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	190,335,499	33	197,758,816
	34	Total liabilities and net assets/fund balances	295,262,348	34	300,527,562

Form	990 (2015)			F	Page <b>12</b>	
Par	t XI Reconcilliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	🔽	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		29.8	336,969	
2	Total expenses (must equal Part IX, column (A), line 25)	2			792,328	
3	Revenue less expenses Subtract line 2 from line 1	3				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				955,359	
5	Net unrealized gains (losses) on investments	4		190,3	335,499	
6	Donated services and use of facilities	5		6,7	746,603	
7	Investment expenses	6			995,812	
		7				
8	Prior period adjustments	8		6,3	341,933	
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1,7	705,672	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		197,7	758,816	
Par	t 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	_				
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 revie a separate basis, consolidated basis, or both	ewed or	1			
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
	If Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate				
	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 oversig of the audit, review, or compilation of its financial statements and selection of an independent accountant		<b>2</b> c	Yes		
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	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			

#### **Additional Data**

Software ID: Software Version:

**EIN:** 23-1500085

Name: JEWISH FEDERATION OF GREATER

PHILADELPHIA

#### Form 990, Part III, Line 4a

5,405,162 ) (Revenue \$ 4a (Code ) (Expenses \$ 6,607,369 including grants of \$ THE JEWISH FEDERATION IS COMMITTED TO FUNDING SERVICES THAT MEET THE MOST BASIC NEEDS OF VULNERABLE COMMUNITY MEMBERS OF ALL AGES. IN GREATER PHILADELPHIA, IN ISRAEL AND AROUND THE WORLD THIS INCLUDES DELIVERING NUTRITIONAL SUPPORT, PROVIDING GRANTS FOR CRITICAL NEEDS, ENABLING PEOPLE WITH DISABILITIES TO REACH THEIR FULL POTENTIAL AND FACILITATING A WIDE ARRAY OF SERVICES HELPING OLDER ADULTS TO AGE SAFELY, NOURISH THEIR SOULS AND LIVE WITH DIGNITY IN THEIR OWN HOMES THANKS TO THE COMMUNITY'S SUPPORT - 15,230 LOCAL LOW-INCOME INDIVIDUALS RECEIVED FOOD ASSISTANCE- 1,130 AT-RISK CHILDREN IN ISRAEL RECEIVED TUTORING AND MENTORING- 802 OLDER ADULTS AND PEOPLE WITH DISABILITIES WERE PROVIDED WITH TRANSPORTATION- 1,234 HOLOCAUST SURVIVORS RECEIVED BASIC NECESSITIES- 3,549 LOCAL OLDER ADULTS ATTENDED SOCIALIZATION PROGRAMS CONNECTING THEM WITH THEIR PEERS AND ENGAGING THEM MENTALLY AND PHYSICALLY- 1,022 VULNERABLE JEWS RECEIVED AN EMERGENCY GRANT HELPING THEM THROUGH A FINANCIAL HARDSHIP- 1,155 HOME MODIFICATIONS AND REPAIRS ENABLING OLDER ADULTS TO STAY IN THEIR OWN HOMES-43 SYNAGOGUES AND ORGANIZATIONS COLLECTED 50,650 POUNDS OF FOOD- 563 ISRAELI ADULTS LIVING WITH DISABILITIES RECEIVED SPECIALIZED VOCATIONAL TRAININGIN ADDITION. AMOUNTS ARE INCLUDED THAT WERE DISTRIBUTED VIA DONOR-DESIGNATED CAMPAIGN SUPPORT. THESE AMOUNTS WERE DISTRIBUTED VIA DONOR-DESIGNATED CAMPAIGN SUPPORT. DISTRIBUTED TO PROGRAMS IN ADDITION TO THOSE AMOUNTS DISTRIBUTED THROUGH THE ANNUAL GRANT PROCESS. THE OUTCOMES FOR THE AMOUNTS DISTRIBUTED THROUGH THE ANNUAL GRANT PROCESS ARE LISTED ABOVE

#### Form 990, Part III, Line 4b

(Code

) (Expenses \$

THE JEWISH FEDERATION SUPPORTS AND PROMOTES VIBRANT JEWISH LIVING AND LEARNING LOCALLY AND ABROAD FOR CHILDREN, TEENS, YOUNG ADULTS AND FAMILIES NO MATTER WHERE PEOPLE ARE ON THEIR JEWISH JOURNEY, WE HELP PROVIDE OPPORTUNITIES INCLUDING EDUCATIONAL AND CAMPING RESOURCES,

LEADERSHIP DEVELOPMENT AND FAMILY PROGRAMS THIS ENABLES COMMUNITY MEMBERS OF ALL AGES TO ENGAGE IN THE RICH TAPESTRY OF JEWISH LIFE,

CAMPING- 1.575 PHILADELPHIANS PARTICIPATED IN TRANSFORMATIVE ISRAEL EXPERIENCES- 8,460 JEWISH CHILDREN IN THE FORMER SOVIET UNION RECEIVED

ANNUAL GRANT PROCESS THE OUTCOMES FOR THE AMOUNTS DISTRIBUTED THROUGH THE ANNUAL GRANT PROCESS ARE LISTED ABOVE

6.404.083

SCHOLARSHIPS TO OVERNIGHT CAMP- 600 TEENS PARTICIPATED IN JEWISH-THEMED SOCIAL AND EDUCATIONAL PROGRAMS- 650 JEWISH YOUNG ADULTS IN

EDUCATORS PARTICIPATED IN PROFESSIONAL DEVELOPMENT- 2,700 PEOPLE IN GREATER PHILADELPHIA WERE INVOLVED IN HOLOCAUST EDUCATION

PROGRAMMING- 8 ALLIANCES OF SYNAGOGUES, COMMUNITY VOLUNTEERS, AND REPRESENTATIVES FROM JEWISH ORGANIZATIONS CREATED AN INSPIRED JEWISH COMMUNITY AND OFFER UNIQUE JEWISH PROGRAMMINGIN ADDITION, AMOUNTS ARE INCLUDED THAT WERE DISTRIBUTED VIA DONOR-DESIGNATED CAMPAIGN SUPPORT THESE AMOUNTS WERE DIRECTLY DISTRIBUTED BY JEWISH FEDERATION TO PROGRAMS IN ADDITION TO THOSE AMOUNTS DISTRIBUTED THROUGH THE

including grants of \$

GREATER PHILADELPHIA PARTICIPATED IN LEADERSHIP TRAINING- 5,498 CHILDREN RECEIVED FREE JEWISH-THEMED BOOKS AND MUSIC- 923 JEWISH

5,012,117 ) (Revenue \$

WHILE SECURING THE FUTURE OF OUR JEWISH WORLD THANKS TO THE COMMUNITY'S SUPPORT - 2,867 SCHOLARSHIPS AWARDED FOR JEWISH LEARNING AND

#### Form 990, Part III, Line 4c

(Code (Expenses \$ 8.531.481

FEDERATION AND ARE IN ADDITION TO THE ANNUAL GRANT PROCESS

PHILANTHROPIC FUND AND DIRECT ENDOWMENT SUPPORT AMOUNTS REPRESENT DISTRIBUTIONS FROM OUR PHILANTHROPIC FUNDS WHICH ARE DISTRIBUTED. BASED ON THE NON-BINDING RECOMMENDATIONS OF THE PHILANTHROPIC FUND HOLDER WHICH FURTHER THE MISSION OF JEWISH FEDERATION. ALSO

including grants of \$

INCLUDED ARE DISTRIBUTIONS FROM ENDOWMENT FUNDS THAT SUPPORT AGENCIES AND/OR PROGRAMS WHICH FURTHER THE MISSION OF JEWISH

8.125.378 ) (Revenue \$

# (Code ) (Expenses \$ 4,103,095 including grants of \$ 0 ) (Revenue \$ ) PROGRAM OPERATIONS ARE PRIMARILY FUNDS USED TO ADMINISTER, MEASURE AND EVALUATE THE IMPACT OF OUR PROGRAMS ON THE COMMUNITY

(Code ) (Expenses \$ 830,397 including grants of \$ 95,000 ) (Revenue \$ )
OTHER PROGRAM SUPPORT REPRESENTS GRANTS AND OTHER EXPENSES TO FURTHER THE MISSION OF JEWISH FEDERATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde				iiu	iste	es, 1	ve y	Employees, mg	lilest	
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	Posit more the perso	ion ( han o n is b	ne b ooth	ox, ι an o	unles s fficer		( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)		
BENNETT L AARON TRUSTEE, BOARD OF DIRECTOR	5 00	×						0	0	
CAROL AARON TRUSTEE	2 00	х						0	0	
MADLYN ABRAMSON TRUSTEE	2 00	×						0	0	
ARLIN M ADAMS TRUSTEE	2 00	x						0	0	
ANDREA ADELMAN TRUSTEE	2 00	×						0	0	

45 00

5 00 5 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Х

Χ

Χ

Χ

Х

Х

NAOMI L ADLER

LOUISE B ALBERT

HOWARD ALPERT

BRETT H ALTMAN

TRUSTEE

TRUSTEE

TRUSTEE

SUSANNA LACHS ADLER

.....

.....

TRUSTEE, BOARD OF DIRECTOR, CEO

TRUSTEE, BOARD OF DIRECTOR, VP

432,199

0

0

(F) Estimated amount of other

compensation

from the

organization and related organizations

33,586

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde					1316	C3, I	ve y	Linpioyees, ing	liest
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more the perso	ion ( han o n is b	ne b ooth	ox, ι an o	unles s fficer	5	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		
HOWARD B ASHER TRUSTEE	2 00	×						0	0
DANIEL E BACINE TRUSTEE	2 00	×						0	0
LEONARD BARRACK TRUSTEE, BOARD OF DIRECTOR	5 00	×						0	0
JEFFREY A BARRACK TRUSTEE	2 00	×						0	0
LYNNE BARRACK TRUSTEE	2 00	×						0	0

2 00

2 00

5 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Χ

Х

Χ

Х

ROBIN BATOFF

JACK BELITSKY

MICHAEL R BELMAN

DONALD A BERG

HAROLD BERGER

TRUSTEE, BOARD OF DIRECTOR

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

.....

.....

0 0

0

0

0

0

0

(F) Estimated amount

of other

compensation

from the

organization and related organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation

from the

organization and related organizations

0

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs			•	•			
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more ti perso and a	ion ( han o n is b	ne b ooth	ox, i an o	unles s fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)		
STEVEN BERK TRUSTEE	2 00	×						0	0	
EDWIN J BERKOWITZ TRUSTEE	2 00	х						0	0	
BRYNA BERMAN TRUSTEE	2 00	×						0	0	
RICHARD W BERMAN	2 00	×						0	0	

2 00

2 00

2 00

2 00

5 00

2 00

. . . . . . . . . . . . . . . . . . .

Х

Х

Х

Χ

Χ

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

SHARYN BERMAN

GLADYS B BERNSTEIN

JOHN K BINSWANGER

CRAIG R BLACKMAN

MARK S BLASKEY

PENNI F BLASKEY

TRUSTEE, BOARD OF DIRECTOR

.....

.....

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

compensated Employees, and Inde	pendent cor	luacio	,, 3				I	Ī	1
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Position a Position of the Pos	ion ( han o n is b	ne b ooth	ox, ι an o /trus	inless fficer tee)	( <b>D)</b> 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
SALLY COOPER BLEZNAK TRUSTEE	2 00	Х					0	0	0
SHEREE I BLOCH TRUSTEE	2 00	х					0	0	0
DAVID J BLUM TRUSTEE	2 00	х					0	0	0
JONAS BRACHFELD TRUSTEE	2 00	Х					0	0	0
FRED E BRAEMER TRUSTEE	2 00	Х					0	0	0
JONATHAN BRODER TRUSTEE	2 00	Х					0	0	0
IRIS D BROWNSTEIN	2 00	V					0	0	

5 00

2 00

0 30

Χ

Х

0

0

0

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

TRUSTEE

TRUSTEE

TRUSTEE

JASON M COLE

ALAN E CASNOFF

GARY CHARLESTEIN

TRUSTEE, BOARD OF DIRECTOR

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation

from the

organization and related organizations

0

0

0

0

0

Compensated Employees, and Inde					1310	C3, I	ve y		, iiest
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	Posit more the perso	ion ( han o n is b	ne b oth	ox, ι an o	unles s fficer	5	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		
SHIRLEY CONSTON TRUSTEE	2 00	х						0	0
STUART CONSTON TRUSTEE	2 00	×						0	0
HAROLD CRAMER TRUSTEE	2 00	×						0	0
HOWARD J DAVIS TRUSTEE	2 00	×						0	0
BERNARD P DISHLER	2 00							_	_

2 00

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Χ

Х

Χ

Х

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

LANA DISHLER

STEPHEN V DUBIN

LOWELL H DUBROW

GEOFFREY M DUFFINE

CLAUDIA DUNNOUS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation from the

organization and related organizations

0

0

0

0

Compensated Employees, and Inde					300	, .	,	Employees, mg	ii C S C
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position and a person and individual trustee or director	ion ( han o n is b	ne b ooth	ox, an o /trus	unles s ifficer	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
BERNARD EIZEN TRUSTEE	2 00	х						0	0
JEROME P EPSTEIN TRUSTEE	2 00	×						0	0
GARY E ERLBAUM TRUSTEE, BOARD OF DIRECTOR, VP	5 00	×		x				0	0
SCOTT ERLBAUM TRUSTEE	2 00	х						0	0
DANIEL ERLBAUM TRUSTEE	2 00	х						0	0
ARLENE FICKLER	2 00	×						0	0

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

Χ

Χ

Χ

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

JOYCE FISHBEIN

ANNABELLE FISHMAN

PAUL M FIRES

PHYLLIS SOBO FISCHER

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation from the

organization and related organizations

0

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs			-	_		
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position and individual trustee	ion ( han o n is b	ne b ooth	ox, l an o /trus	unless fficer stee)		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
MARK FISHMAN TRUSTEE	2 00	×						0	0
RICHARD J FOX TRUSTEE	2 00	×						0	0
LAURIE FRANZ TRUSTEE, BOARD OF DIRECTOR	5 00	x						0	0
JOEL FREEDMAN TRUSTEE	2 00	×						0	0
LOUIS W FRYMAN	2 00	x						0	0

2 00

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

Χ

Х

Χ

Χ

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

IVAN H GABEL

ABRAHAM J GAFNI

LEWIS I GANTMAN

SARAH GENTRY

SARITA GOCIAL

.....

Form 990, Part VII - Compensation Compensated Employees, and Inde				Tru	ste	es, I	(ey	Employees, Hig	hest
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more the perso	ion ( han o n is b	ne b oth ctor,	ox, i an o /trus	unless fficer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
	organizations	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		
DAVID G GOLD TRUSTEE	2 00	×						0	0
MORRIE GOLD TRUSTEE	2 00	×						0	0
MOREY H GOLDBERG TRUSTEE, BOARD OF DIRECTOR, VP	5 00	х		x				0	0
EDGAR R GOLDENBERG TRUSTEE	2 00	×						0	0
ROBERT B GOLDER TRUSTEE	2 00	×						0	0

2 00

2 00

5 00

2 00

5 00

. . . . . . . . . . . . . . . . . . .

......

Χ

Х

Х

Χ

Х

ANDREW A GOLDMAN

TRACY H GORDON

RICHARD J GREEN

SAMUEL J GREENBLATT

TRUSTEE, BOARD OF DIRECTOR, VP

TRUSTEE, BOARD OF DIRECTOR

TRUSTEE

TRUSTEE

TRUSTEE

JOSH GROSS

.....

.....

.....

(F) Estimated amount

of other

compensation

from the

organization and related organizations

0

0

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(F) Estimated amount of other

compensation

from the

organization and related organizations

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs			, .	,	p.:e, eee,g	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Posit more the perso and a or director	tion (d han o n is b	ne b ooth ctor/	ox, ι an oi /trus	unles s fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
	dotted line)	Individual trustee or director	tional Trustee		employee	Highest compensated emptoxies	,		
DAVID GUTIN TRUSTEE	2 00	×						0	0
MARY BERT GUTMAN TRUSTEE	2 00	×						0	0
MATTHEW HANDEL TRUSTEE	2 00	×						0	0
ADAM H HERZIG TRUSTEE	2 00	×						0	0
LEE S HILLERSON TRUSTEE	2 00	x						0	0

5 00

5 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

Χ

Х

Χ

Χ

ALAN J HOFFMAN

TRUSTEE, BOARD OF DIRECTOR

TRUSTEE, BOARD OF DIRECTOR

MARJORIE HONICKMAN

DAVID M HOROWITZ

TRUSTEE

TRUSTEE

TRUSTEE

PAUL L JAFFE

DAVID L HYMAN

.....

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	ors					i	·	-
(A) Name and Title	(B) A verage hours per week (list any hours for related  (C) Position (do not check more than one box, unles person is both an officer and a director/trustee)		inless fficer tee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amoun of other compensation from the			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
KEITH JOFFE TRUSTEE	2 00	х						0	0	0
CHARLES KAHN TRUSTEE	2 00	х						0	0	0
ERNEST M KAHN TRUSTEE	2 00	х						0	0	0
MILTON KANT TRUSTEE	2 00	х						0	0	0
NED J KAPLIN TRUSTEE	2 00	х						0	0	0
ARTHUR KARAFIN	5 00	х		х				0	0	0

2 00

2 00

5 00

2 00

Х

Χ

Χ

Х

.....

.....

TRUSTEE, BOARD OF DIRECTOR, VP

TRUSTEE, BRD OF DIR, TREASURER

DAVID KASOFF

JOY W KEISER

JILL KLEEMAN

TRUSTEE

WAYNE D KIMMEL

TRUSTEE

TRUSTEE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(F) Estimated amount of other

> compensation from the

organization and

related organizations

0

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs			•	-		
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	Posit more ti perso and a	ion ( han o n is b	ne b ooth	ox, i an o	unles s fficer	5	(D) Reportable compensation from the organization (W- 2/1099-MISC)	<b>(E)</b> Reportable compensation from related organizations (W-
STEPHEN B KLEIN	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		2/1099-MISC)
STEPHEN B KLEIN TRUSTEE	2 00	×						0	0
RENA KOPELMAN TRUSTEE, BOARD OF DIRECTOR, VP	5 00	×		x				0	0
LISA GLASSNER KOVACS TRUSTEE	2 00	×						0	0
ARNOLD H KRAMER TRUSTEE	2 00	х						0	0
KAREN B KRAMER TRUSTEE	2 00	×						0	0
BRADLEY A KROUSE	2 00								

Χ

Х

Χ

Χ

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

CHARLES D KURTZMAN

SARA WEINBERG LAVER

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

MARVIN LEVIN

CAROLE LANDIS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(F) Estimated amount of other compensation from the

organization and related organizations

0

0

0

0

0

Compensated Employees, and Inde					1310	C3, I	ve y	Linployees, ing	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more til perso and a individual i	ion ( nan o n is b	ne b ooth	ox, i an o /trus	unless fficer stee)	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
	dotted line)	Individual trustee or director	ional Trustee		employee	Highest compensated employee			
JONATHAN L LEVIN TRUSTEE	2 00	×						0	0
LORI J LEVIN TRUSTEE	2 00	х						0	0
MICHELE S LEVIN TRUSTEE	2 00	х						0	0
MURRAY S LEVIN TRUSTEE	2 00	Х						0	0
SHARON P LEVIN TRUSTEE	2 00	×						0	0

2 00

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

Χ

Х

Χ

Χ

ADAM LEVINE

ROBERT G LEVINE

BARBARA LINCOW

ADELE S LIPTON

IRWIN J LIPTON

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation

from the

organization and related organizations

0

0

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs			,	,		
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position and a person and individual trustee or director	ion ( nan o n is b	ne b oth	ox, i an o /trus	unless fficer stee)	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
WILLIAM D LUTERMAN TRUSTEE	2 00	х						0	0
JILL L MADERER TRUSTEE	2 00	×						0	0
JOANN MALMUD TRUSTEE	2 00	х						0	0
THEODORE R MANN TRUSTEE	2 00	х						0	0
SIDNEY MARGULIES	2 00	х						0	0

2 00

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Χ

Х

Χ

Χ

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

MICHAEL P MARKMAN

GREGORY MARKS

DAVID G MARSHALL

ADAM P MEINSTEIN

SHELLEY M MENKOWITZ

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation from the

organization and related organizations

0

0

0

0

Compensated Employees, and Inde					1516	es, i	ve y	Employees, mg	, ilest
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position and individual trustee	tion ( han o n is b	ne b ooth	ox, ι an o	unless fficer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
JAMES M MEYER TRUSTEE	2 00	×						0	0
SARA MINKOFF TRUSTEE, BOARD OF DIRECTOR	5 00	х						0	0
JAY B MINKOFF TRUSTEE	2 00	х						0	0
ALAN H MOLOD	2 00	×						0	0

2 00

2 00

5 00

5 00

2 00

5 00

. . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Х

Х

Χ

Χ

Χ

Х

TRUSTEE

TRUSTEE

TRUSTEE

ROY S NEFF

STEPHEN H MOSS

BERNARD NEWMAN

EDWARD NEWMAN

TRUSTEE

GAIL NORRY

BARBARA MORGENSTERN

TRUSTEE, BOARD OF DIRECTOR

TRUSTEE, BRD OF DIR, PRESIDENT

TRUSTEE, BOARD OF DIRECTOR, VP

.....

.....

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation from the

organization and related organizations

0

0

0

0

0

Compensated Employees, and Inde					1316	C3, I	ve A			
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more ti perso and a	tion ( han o n is b	ne b ooth	ox, i an o	unles s ifficer	5	( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	
SHARI J ODENHEIMER TRUSTEE	2 00	x						0	0	
RONALD L PANITCH TRUSTEE	2 00	x						0	0	
RUSSELL D PAUL TRUSTEE	2 00	x						0	0	
RAYMOND G PERELMAN TRUSTEE	2 00	х						0	0	
COOKIE PERILSTEIN TRUSTEE	2 00	х						0	0	
JAYNE D PERILSTEIN	2 00									

Χ

Х

Χ

Χ

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

......

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

MARC PRINE

NAOMI D PRUSKY

DAVID POLLACK

LAWRENCE J POLLOCK

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation

from the

organization and related organizations

0

0

0

Compensated Employees, and Inde				ıru	iste	es, i	key	Employees, Hig	nest	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Posit more t perso and a	tion ( han o n is b	ne b ooth	ox, ι an o	unles s fficer	5	( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	
LAWRENCE REICHLIN TRUSTEE	2 00	х						0	0	
BETH G REISBOARD TRUSTEE	2 00	х						0	0	
JACOB REITER TRUSTEE	2 00	х						0	0	
MARY RELLES TRUSTEE	2 00	х						0	0	
ELLIOT ROSEN TRUSTEE	2 00	х						0	0	
ILAN ROSENBERG	2 00									

Χ

Χ

Χ

Х

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

LYN M ROSS

JOYCE ROSENBERG

PETER ROSENBERG

JAMES A ROSENSTEIN

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more ti perso and a	tion ( han o n is b	ne b oth	ox, ι an o ⁄trus	ınles s fficer tee)		( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
MICHAEL J ROSS TRUSTEE	2 00	Х						0	0	0
RONALD RUBIN TRUSTEE, BOARD OF DIRECTOR	5 00	X						0	0	0
RENEE G SACKEY TRUSTEE	2 00	×						0	0	0
ELLYN G SAFT TRUSTEE, BRD OF DIR, SECRETARY	5 00 1 00	Х		x				0	0	0
SHERRIE R SAVETT TRUSTEE, BOARD OF DIRECTOR	5 00	х						0	0	0
MILTON S SCHNEIDER TRUSTEE, BOARD OF DIRECTOR	5 00	×						0	0	0

Χ

Χ

Χ

2 00

5 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

CARL W SCHNEIDER

MIRIAM A SCHNEIROV

ALLAN B SCHNEIROV

WILLIAM M SCHWARTZ

TRUSTEE, BOARD OF DIRECTOR

TRUSTEE

TRUSTEE

TRUSTEE

.....

.....

.....

0

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

of other

compensation from the

organization and related organizations

0

0

0

0

0

0

						,		
(B) A verage hours per week (list any hours for related organizations below dotted line)	more tl	ion ( han o n is b	do n ne b ooth	ox, i an o	unles s fficer		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
2 00	×						0	0
2 00	×						0	0
5 00	х						0	0
2 00	х						0	0
	Pendent Cor  (B)  A verage hours per week (list any hours for related organizations below dotted line)  2 00  2 00  2 00	Pendent Contracto  (B)  A verage hours per week (list any hours for related organizations below dotted line)  2 00  2 00  X  2 00  X  2 00  X	Position (more than of person is the and a director director)  2 00  2 00  X  2 00  X  2 00  X  2 00  X	A verage hours per week (list any hours for related organizations below dotted line)  2 00  2 00  2 00  X  2 00  X  2 00  X	A verage hours per week (list any hours for related organizations below dotted line)  2 00  2 00  X  2 00  X  2 00  X  2 00  X  2 00  X	A verage hours per week (list any hours for related organizations below dotted line)  2 00  2 00  X  2 00  X	Pendent Contractors  (B) A verage hours per week (list any hours for related organizations below dotted line)  2 00  2 00  X  2 00  X	(B) A verage hours per week (list any hours for related organizations below dotted line)  200  x  0  200  0  0  0  0  0  0  0  0  0  0

2 00

2 00

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Χ

Х

Х

Χ

Χ

NANCY SELARNICK

JUDIE SHAPIRO

RAYMOND L SHAPIRO

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

JON SHAPIRO

BETSY R SHEERR

ALAN W SHEINBERG

of other

compensation from the

organization and related organizations

0

0

0

0

Form 990, Part VII - Compensation Compensated Employees, and Inde				Tru	ıste	es, I	Key	Employees, Hig	hest
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Position and individual trustee or director	ion ( han o n is b	ne b ooth	an o	unles s ifficer		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
PHILIP M SHIEKMAN TRUSTEE	2 00	×						0	0
SHIRLEY R SHILS TRUSTEE	2 00	×						0	0
MURRAY H SHUSTERMAN TRUSTEE	2 00	×						0	0
MICHAEL SILVERBERG TRUSTEE	2 00	×						0	0
HOWARD H SILVERMAN	2 00	.,							

5 00

2 00

2 00

2 00

5 00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Χ

Х

Х

Χ

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

BERYL D SIMONSON

EILEEN S SKLAROFF

CONSTANCE SMUKLER

MARK I SOLOMON

MURRAY M SPAIN

TRUSTEE, BOARD OF DIRECTOR

TRUSTEE, BOARD OF DIRECTOR

.....

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(F) Estimated amount of other compensation from the organization and related organizations

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs				_			
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Posit more ti perso and a	ion ( han o n is b	ne b oth	ox, an o	unless ifficer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	
		Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			
TRACEY P SPECTER TRUSTEE	2 00	×						0	0	
S TY STEINBERG TRUSTEE	2 00	×						0	0	
E MATTHEW STEINBERG TRUSTEE	2 00	×						0	0	
MITCH STERLING TRUSTEE	2 00	х						0	0	
J BRETT STUDNER TRUSTEE	2 00	Х						0	0	
LEON C SUNSTEIN TRUSTEE	2 00	×						0	0	

2 00

2 00

2 00

0 30 2 00 Χ

Χ

Χ

......

. . . . . . . . . . . . . . . . . . .

BRANDON SWARTZ

ANDREW SZABO

MOSES M VEGH

MARGIE P WARGON

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

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

(F) Estimated amount

of other

compensation from the

organization and related organizations

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs						
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Position of director	ion ( han o n is b	ne b oth	ox, ι an o /trus	inless fficer tee)	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)
DAVID H WEINSTEIN TRUSTEE	2 00	×						0	0
ARI Y WEINTRAUB TRUSTEE	2 00	×						0	0
DANIELLE M WEISS TRUSTEE	2 00	×						0	0
DAVID H WICE TRUSTEE	2 00	х						0	0

2 00

2 00

2 00

2 00

2 00

2 00

. . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

Х

Х

Χ

Χ

Χ

MICHAEL B WILLNER

JEFFREY S WILSON

SONIA B WOLDOW

JOSEPH M YOHLIN

NORMAN P ZARWIN

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

JANET ZOLOT

......

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

Compensated Employees, and Inde	penaent cor	itractu	115					1	•	
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion ( han o n is b	ne b oth	ox, ι an o	ınles s ficer	;	<b>(D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
JEROME NACHLIS  CHIEF FINANCIAL & ADMIN OFFICER	45 00 2 00			x				223,320	0	29,131
STEVEN ROSENBERG CHIEF MARKETING OFFICER	45 00 25 00				х			220,723	0	732
DONNA FREYMAN DIRECTOR OF HUMAN RESOURCES	45 00					Х		136,905	0	40,180
DUKE NAVE CONTROLLER	45 00 2 00					х		158,446	0	14,849

45 00

45 00

45 00

0 30 0.00

. . . . . . . . . . . . . . . . . . .

. . . . . . . . . . . . . . . . . .

ROBERT QUATTRO

ROBERT SELTZER

RACHEL GROSS

IRA SCHWARTZ

FORMER CEO

CAMPAIGN DIRECTOR

DIRECTOR OF INFORMATION TECHNOLOGY

DIRECTOR PLANNED GIVING & ENDOWMENT

23,921

25,824

12,979

0

0

0

139,260

155,621

171,404

323,580

Х

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

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

DLN: 93493195011057

SCHEDULE A **Public Charity Status and Public Support** (Form 990 or Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

990EZ)

2

► 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.

Name of the organization JEWISH FEDERATION OF GREATER PHILADELPHIA Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I

**Employer identification number** 23-1500085

4		A medical research or hospital's name, city,		rated in conjunction v	with a nospital d	iescribea in <b>se</b>	ection 170(b)(1)(A)(iii	). Enter the
5		An organization opera 170(b)(1)(A)(iv). (Co			iversity owned	or operated by	a governmental unit d	lescribed in <b>section</b>
6	Г	A federal, state, or loc	al government	or governmental unit	described in <b>se</b>	ection 170(b)(	1)(A)(v).	
7	~	An organization that n described in <b>section 1</b>	•	•		om a governm	ental unit or from the g	eneral public
8	Г	A community trust des	scribed in <b>sect</b>	ion 170(b)(1)(A)(vi)	(Complete Par	tII)		
9	Γ _	receipts from activitie from gross investmen organization after Jun	es related to it it income and i e 30, 1975 S	s exempt functions—s unrelated business tax ee <b>section 509(a)(2).</b>	subject to certa xable income (li (Complete Part	in exceptions, ess section 5: III )	ributions, membership and (2) no more than 3 11 tax) from businesse	331/3% of its support
10		An organization organ	ized and opera	ted exclusively to tes	it for public safe	ety See <b>sectio</b>	on 509(a)(4).	
11	Γ	one or more publicly s the box in lines 11a th	upported orga nrough 11d tha	nizations described in It describes the type o	section 509(a)	)(1) or sectior ganization and	nctions of, or to carry o i 509(a)(2)  See <b>sectio</b> d complete lines 11e, 1	<b>n 509(a)(3).</b> Check 1f, and 11g
а	Г		n(s) the power	to regularly appoint o	r elect a majóri		organization(s), typical tors or trustees of the	
b			pporting organ	ization vested in the s			orted organization(s), b manage the supported	
<b>c</b>	Γ	Type III functionally i supported organization	i <b>ntegrated.</b> A s n(s) (see instr	supporting organizatio uctions) <b>You must co</b>	mplete Part IV,	Sections A , D		•
d	Γ		ated The orga	nızatıon generally mu	st satisfy a dist	rıbutıon requi	rement and an attentive	
e	Г	integrated, or Type III	I non-function	ally integrated suppor	tıng organizatıd	n	is a Type I, Type II, T	ype III functionally
f	Ente	r the number of support	ed organızatıo	ns			· · · · · · · <u> </u>	
g 		Provide the following i	nformation abo	out the supported orga	anization(s)			
Nan	ne of s	(i) supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the orga listed in your docume	nızatıon governıng	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
					Yes	No		
Tota	<u> </u>							

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2015 Page 2 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 (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 57,624,996 29,507,909 25,180,665 28,155,765 38,692,159 179,161,494 membership fees received (Do not include any unusual grants ) 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 Total. Add lines 1 through 3 57,624,996 28,155,765 38,692,159 29,507,909 25,180,665 179,161,494 The portion of total contributions by each person (other than a governmental unit or publicly 12.886.794 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 166,274,700 from line 4 Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) 57,624,996 28,155,765 38,692,159 29,507,909 25,180,665 179,161,494 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, 6,340,223 7,663,265 7,580,065 6,715,671 6,761,985 35,061,209 royalties and income from similar sources Net income from unrelated business activities, whether or 1,473,797 294,630 627,783 612,531 571,732 3,580,473 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 7,196,557 362,390 77,324 356,590 8.426.974 434,113 capital assets (Explain in Part VI) 11 Total support. Add lines 7 226,230,150 through 10 **12** Gross receipts from related activities, etc. (see instructions.) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 73 500 % Public support percentage for 2014 Schedule A, Part II, line 14 15 15 73 450 % 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 ▶□ 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

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

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	1 fails to qualify	y under the tes	ts listed below	<u>, piease compie</u>	ete Part .	11.)	
_Se	ction A. Public Support	T	1	1	1			_
/ a = 6	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)20	15	<b>(f)</b> ⊤otal
(OF 1	iscal year beginning in) ► 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							
5	paid to or expended on its behalf The value of services or facilities							
5	furnished by a governmental unit							
	to the organization without charge							
6	<b>Total.</b> 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							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
_	from line 6 )							
	ction B. Total Support							
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)20	15	<b>(f)</b> Total
9	iscal year beginning in) ► A mounts from line 6							
10a	Gross income from interest,							
10a	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							
С	Add lines 10a and 10b							
11	Net income from unrelated							
	business activities not included							
	ın lıne 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)	ion the commit	l nia fir-t - '	threat formal	64h +a		017.30	
14	First five years.If the Form 990 is f	or the organization	on's first, second	, tnira, fourth, or	ππ tax year as a	section	01(c)(.	· · · · · · · · · · · · · · · · · · ·
	check this box and stop here	lia Cummant D						<u>▶</u>
	ction C. Computation of Pub			4.2 1 (0)				
15	Public support percentage for 2015			13, column (f))		15		
16	Public support percentage from 20:	14 Schedule A, P	art III, line 15			16		
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge				
17	Investment income percentage for	<b>2015</b> (line 10c, c	olumn (f) dıvıded	by line 13, colur	mn (f))	17		
18	Investment income percentage from	n <b>2014</b> Schedule	A, Part III, line 1	١7		18		
	<b>33 1/3% support tests—2015.</b> If the				t line 15 is more t		3% and	line 17 is not
1 7 a	more than 33 1/3%, check this box	•		•			•	↑ IIIIe 17 is not
h	<b>33 1/3% support tests—2014.</b> If the							•
	18 is not more than 33 1/3%, check	-						
20	<b>Private foundation.</b> If the organization		-	· ·		•	_	<b>▶</b> □

#### Part IV Supporting Organizations

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

Se	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?  If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	<b>3</b> c		
4a	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use  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 $(2)^2$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
.0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	<b>10</b> a		
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		
.1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c		

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

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

CI	neck here if the organization satisfied the Integral Part Test as a qualifying tr	ust on N	ov 20,1970 <b>See inst</b>	ructions. All other
Τy	pe III non-functionally integrated supporting organizations must complete S	ections	A through E	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
	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		
	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	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	A verage monthly value of securities	1a		
)	A verage monthly cash balances	1b		
5	Fair market value of other non-exempt-use assets	<b>1</b> c		
t	Total (add lines 1a, 1b, and 1c)	<b>1</b> d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	neck here if the current year is the organization's first as a non-functionally-i	ntegrate	d Type III supporting (	organization (see

Part V Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (co	ontinued)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	orted organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
<b>7 Total annual distributions.</b> Add lines 1 through 6			
8 Distributions to attentive supported organizations to details in Part VI) See instructions	o which the organization is r	esponsive (provide	
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 requiredsee instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015			
а			
<u>b</u>			
С			
<b>d</b> From 2013			
e From 2014			
f Total of lines 3a through e			
Applied to underdistributions of prior years     Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2015 from Section D, line 7			
<u> </u>			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
<b>5</b> 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)			
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c			
8 Breakdown of line 7			
<u>a</u>			
b			
c Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			

# 990 Schedule A, Supplemental Information Return Reference Explanation SCHEDULE A, PART II, LINE 362,390 2014 AMOUNT \$ 77,324 2015 AMOUNT \$ 356,590 EXPLANATION OF OTHER

INCOME

### Schedule A (Form 990 or 990-EZ) 2015

DLN: 93493195011057

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

Department of the Treasury Internal Revenue Service

#### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Inspection

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

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

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

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

• if the	Section e orga 35c (P	n 501(c)(3) organizations th anization answered "Yes Proxy Tax) (see separate		under section 50	1(h)) Complete Part II-B Do	not complete Part II-A
N a JEV	me of t	n 501(c)(4), (5), or (6) orga the organization DERATION OF GREATER	inizations Complete Part III			tification number
	t I-A		ganization is exempt under s	section 501(c	23-1500085	organization
						organization.
1		·	ganization's direct and indirect politic	al campaign activ	rities in Part IV	
2		ical expenditures			•	\$
3	Volu	nteer hours				
Par	t I-B	Complete if the or	ganization is exempt under :	section <b>501</b> (c	)(3).	
1	Ente	r the amount of any excise	e tax incurred by the organization und	ler section 4955	<b>•</b>	\$
2	Ente	r the amount of any excise	e tax incurred by organization manage	ers under section	4955 ▶	\$
3	Ifthe	e organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4a	Was	a correction made?				☐ Yes ☐ No
b		es," describe in Part IV				
Par	t I-C	Complete if the or	ganization is exempt under s	section <b>501</b> (c	), except section 50	1(c)(3).
1	Ente	r the amount directly expe	ended by the filing organization for se	ction 527 exempt	function activities 🕨	\$
2		r the amount of the filing o npt function activities	rganızatıon's funds contributed to otl	ner organizations	for section 527 ▶	\$
3	Tota	l exempt function expendit	tures Add lines 1 and 2 Enter here a	and on Form 1120	-POL, line 17b ►	\$
4	Dıd t	he filing organization file <b>F</b> e	orm 1120-POL for this year?			Yes No
5	organ amou	nization made payments F unt of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fror rectly delivered to	n the filing organization's f o a separate political orga	unds Also enter the nızatıon, such as a
		(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2						
3						
1						
5						
5 5						

31,303

41,737

37,048,408

37,090,145 1,000,000

250,000

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

Α	Check	<b>&gt;</b>	Г	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
				expenses, and share of excess lobbying expenditures)

	expenses, and share of excess lobbying expenditures)		
В	Check 🕨 🗔 if the filing organization checked box A and "limited control" provisions apply		
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	10,434	_

- Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)

Other exempt purpose expenditures

- Total exempt purpose expenditures (add lines 1c and 1d)

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,00
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

- Subtract line 1g from line 1a If zero or less, enter -0-
- Subtract line 1f from line 1c If zero or less, enter -0-
- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Г	Υ	е	S	No

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

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a)2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
_с	Total lobbying expenditures	65,127	39,804	58,181	41,737	204,849
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b>	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f_	Grassroots lobbying expenditures	16,282	9,951	14,545	10,434	51,212

Return Reference

filed Form 5768 (election under section 501(h)).		(a)		(b)	
r each "Yes" response on lines 1a through 11 below, provide in Part IV a detailed description of the lobbying tivity	g	No		A moun	ıt
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendur through the use of	m,				
Volunteers?			_		
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			4		
d Mailings to members, legislators, or the public?		-	+		
e Publications, or published or broadcast statements?		-	-		
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			_		
i Other activities?			_		
j Total Add lines 1c through 1i					
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		-			
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4013 tay, did it file Form 4730 for this year?					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					n
, ,	ection 501(	c)(5),	or s		
art III-A Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).	ection 501(	c)(5),		Yes	No.
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	ection 501(	c)(5),	1		
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	ection <b>501</b> (	c)(5),	1 2		
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	<u> </u>		1 2 3	Yes	N
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?	ection 501(	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	ection 501(	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TITI-B  Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 3, is answered "Yes."  Dues, assessments and similar amounts from members	ection 501( wered "No"	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  THILB  Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answeline 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  Current year	ection 501(wered "No"	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answeline 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  Current year	ection 501( wered "No"	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answeline 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	ection 501(wered "No"	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  The complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answeline 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	ection 501(wered "No" litical  2a 2b 2c	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answeline 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) do  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).	ection 501(wered "No"  litical  2a 2b 2c ues 3 excess nd	c)(5),	1 2 3 or s	Yes	n
Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  The complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answeline 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) do  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ection 501(avered "No"  litical  2a 2b 2c ues excess	c)(5),	1 2 3 or s	Yes	n

Explanation

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

2015

DLN: 93493195011057

Open to Public Inspection

	me of the organization ISH FEDERATION OF GREATER		Emp	loyer identification number
	ADELPHIA			500085
Pa		r <b>Advised Funds or Other Similar F</b> ed "Yes" on Form 990, Part IV, line 6.	unds	or Accounts.
	complete if the organization answer	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	253	<u> </u>	14
2	Aggregate value of contributions to (during year)	3,347,401		0
3	Aggregate value of grants from (during year) 7,208,081			1,062,688
4	Aggregate value at end of year	59,596,631		20,822,974
5	Did the organization inform all donors and donor funds are the organization's property, subject to		nor advı	sed
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or donor advisor, or for a	ny othe	r purpose 🔽 Yes 🗆 No
	t II Conservation Easements. Comple		on Forr	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th			
	Preservation of land for public use (e.g., recreducation)		ın hıstoı	rically important land area
	Protection of natural habitat	Preservation of a	certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in	the form	n of a conservation
				Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme		2b	
c d	Number of conservation easements on a certified Number of conservation easements included in (	, ,	2c	
u 3	historic structure listed in the National Register  Number of conservation easements modified, tra		2d	o organization during the
	tax year >	nsierreu, reieaseu, extinguisneu, or terminati	eu by tii	e organization during the
_	·			
4 -	Number of states where property subject to cons			
5	Does the organization have a written policy regard violations, and enforcement of the conservation of the	easements it holds?		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing con:	servation easements during the
	A mount of expenses incurred in monitoring, inspi	ecting handling of violations, and enforcing o	oncarv	ation easements during the year
7	► \$	ecting, handing of violations, and emorcing c	.0113 €1 V	ation easements during the year
8	Does each conservation easement reported on li (B)(i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17	<sup>7</sup> 0(h)(4) <b>Yes                                    </b>
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation early	of the footnote to the organization's financia		
Par		ctions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Otl	ner Similar Assets.
1a	If the organization elected, as permitted under Si works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	assets held for public exhibition, education,	or rese	arch in furtherance of public
b	If the organization elected, as permitted under Si works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education,		
(	i) Revenue included on Form 990, Part VIII, line	1	<b>&gt;</b> \$	
	) Assets included in Form 990, Part X			
2	If the organization received or held works of art,	historical treasures, or other similar assets f		
_	following amounts required to be reported under S	SFAS 116 (ASC 958) relating to these items		

Revenue included on Form 990, Part VIII, line 1

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

FGI	(continued)	conections of Ar	t, nistoricar	rreasures, or	Other Sillinar A	55615
3	Using the organization's acquisition, accollection items (check all that apply)	cession, and other reco	rds, check any	of the following tha	at are a significant us	e of its
а	Public exhibition		d $\Gamma$ Lo	oan or exchange p	rograms	
b	Scholarly research		<u> </u>	ther		
c	Preservation for future generations					
4	Provide a description of the organization Part XIII		ain how they fur	ther the organizat	ion's exempt purpose	ın
5	During the year, did the organization sol	icit or receive donation	s of art, historic	al treasures or ot	her sımılar	
	assets to be sold to raise funds rather t					s No
Pa	rt IV Escrow and Custodial Arr. Complete if the organization Part X, line 21.		Form 990, Pai	rt IV, line 9, or i	reported an amour	nt on Form 990,
<b>1</b> a	Is the organization an agent, trustee, cu included on Form 990, Part X?	istodian or other interm	edıary for contr	ubutions or other a	assets not <b>Ye</b> s	s No
ь	If "Yes," explain the arrangement in F	Part XIII and complete	the following ta	ble	Am	ount
c	Beginning balance			1	1c	
d	Additions during the year				1d	
e	Distributions during the year			<u> </u>	1e	
f	- '				1f	
	Ending balance					
<b>2</b> a	Did the organization include an amount	on Form 990, Part X, IIr	ie 21, for escro	w or custodial acc	ount liability? TYes	s No
b	T5/11/2 / 1 / 1				D WIII	
	If "Yes," explain the arrangement in Parart V Endowment Funds. Comple					
Ра	Endowment Funds. Comple	(a)Current year	(b)Prior year	<b>b (c)</b> Two years back	<del></del>	(e)Four years back
1a	Beginning of year balance	89,297,348	95,180,888	84,330,68	+ ' ' ' +	58,348,000
b	Contributions	3,493,662	4,213,805	6,958,63	· · ·	23,571,000
U	Contributions	3,433,002	4,213,003	0,550,05	2,343,012	23,371,000
c	Net investment earnings, gains, and losses	5,568,775	-2,401,881	12,586,21	9 8,161,797	5,926,000
d	Grants or scholarships					
e	Other expenditures for facilities and programs	6,137,885	7,057,410	8,145,36	4 7,374,306	5,596,000
f	Administrative expenses	614,089	638,054	549,28	5 526,421	525,000
'	·	91,607,811	89,297,348	,		81,724,000
y	End of year balance	31,007,011	03,237,310	35,155,65	0 1,330,002	01,721,000
2	Provide the estimated percentage of the	current year end balan	ce (line 1g, col	umn (a)) held as		
а	Board designated or quasi-endowment	43 000 %				
ь	Permanent endowment ► 44 320 %					
	T childrene chaowinene p	12 680 %				
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c					
3a	Are there endowment funds not in the po organization by	essession of the organiz	zation that are h	neld and administe	ered for the	Yes No
	(i) unrelated organizations				3a	n(i) No
	(ii) related organizations					(ii) No
b	If "Yes" on 3a(II), are the related organi		ed on Schedule	R?	3	Bb
4	Describe in Part XIII the intended uses	of the organization's er	ndowment funds			<u> </u>
Pa	rt VI Land, Buildings, and Equip	pment.				
	Complete if the organization	answered 'Yes' to Fo				
	Description of property		(a) Cost or other (investmer		Accumulated basis (c)depreciation	(d)Book value
<b>1</b> a	Land			7,05	4,520	7,054,520
b	Buildings			46,87	3,710 19,840,94	2 27,032,768
c	Leasehold improvements					
d	Equipment			4,29	7,704 3,479,91	9 817,785
е	Other					
_			<u> </u>	10(-) )		
rota	<b>al.</b> Add lines 1a through 1e <i>(Column (d) mu</i>	ısı equai Form 990, Part )	x, coiumn (B), lii	Te IU(C)).		34,905,073

	ry	( <b>b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market valu
1)Financial derivatives     2)Closely-held equity interests			
<b>3)</b> O ther		2 225 750	
A) STATE OF ISRAEL BONDS		2,225,750	F
3) OTHER INVESTMENTS		21,789,953	F
	<b>.</b>	24.045.702	
art VIII Investments—Program Related.		24,015,703	
Complete if the organization answere  (a) Description of investment	ed 'Yes' on Form 990	Part IV, line 11c. <sub>See</sub>	Form 990, Part X, line 13.
(-)		(-,	Cost or end-of-year market value
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX  Other Assets. Complete if the organizat	ion answered 'Yes' on F	orm 990, Part IV, line 1:	Ld See Form 990, Part X, line 15
(a) Des			
	cription		<b>(b)</b> Book value 2.585.58
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	cription		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	сприоп		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	сприоп		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	сприоп		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	сприоп		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	сприоп		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS	сприоп		2,585,58 22,438,66
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS 3) OTHER ASSETS			2,585,58 22,438,66 3,206,73
otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the org	e 15 )		2,585,58 22,438,66 3,206,73
otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org	e 15 )		2,585,58 22,438,66 3,206,73
otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability	e 15 )	'Yes' on Form 990, Pa	2,585,58 22,438,66 3,206,73
otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability	ganization answered		2,585,58 22,438,66 3,206,73
otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability  ederal income taxes	e 15 )		2,585,58 22,438,66 3,206,73
otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability  ederal income taxes	ganization answered	86	2,585,58 22,438,66 3,206,73
Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ONOR DESIGNATED LIABILITIES  IABILITIES UNDER CGA'S	(b) Book value	86	2,585,58 22,438,66 3,206,73
Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ONOR DESIGNATED LIABILITIES  IABILITIES UNDER CGA'S  IABILITIES UNDER REVOCABLE TRUSTS	(b) Book value	86 03 85	2,585,58 22,438,66 3,206,73
Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ONOR DESIGNATED LIABILITIES  IABILITIES UNDER CGA'S  IABILITIES UNDER REVOCABLE TRUSTS  IABILITIES UNDER CRT AGREEMENTS	(b) Book value	86 03 85 28	2,585,58 22,438,66 3,206,73
TO A SSETS HELD UNDER CRT A GREEMENTS  2) NON-PARTICIPATING ASSETS  3) OTHER ASSETS  3) OTHER ASSETS  6	(b) Book value  105,9  3,308,0  13,308,1	86 03 85 28	2,585,58 22,438,66 3,206,73
1) ASSETS HELD UNDER CRT AGREEMENTS 2) NON-PARTICIPATING ASSETS 3) OTHER ASSETS 3) OTHER ASSETS  Fotal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the orgonomy of the complete in the compl	(b) Book value  105,9  3,308,0  13,308,1  1,374,3  2,958,9	86 03 85 28 39	2,585,58 22,438,66 3,206,73
I) ASSETS HELD UNDER CRT AGREEMENTS  2) NON-PARTICIPATING ASSETS  3) OTHER ASSETS  (otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the orgonome see Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ONOR DESIGNATED LIABILITIES  IABILITIES UNDER CGA'S  IABILITIES UNDER REVOCABLE TRUSTS  IABILITIES UNDER CRT AGREEMENTS  NVESTMENT IN EXPONENT  CCRUED PENSION BENEFIT COST	(b) Book value  105,9  3,308,0  13,308,1  1,374,3	86 03 85 28 39	2,585,58 22,438,66 3,206,73
Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organism 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ONOR DESIGNATED LIABILITIES  IABILITIES UNDER CGA'S  IABILITIES UNDER REVOCABLE TRUSTS  IABILITIES UNDER CRT AGREEMENTS  NVESTMENT IN EXPONENT  CCRUED PENSION BENEFIT COST	(b) Book value  105,9  3,308,0  13,308,1  1,374,3  2,958,9	86 03 85 28 39	2,585,58 22,438,66 3,206,73
Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organization of See Form 990, Part X, line 25.	(b) Book value  105,9  3,308,0  13,308,1  1,374,3  2,958,9	86 03 85 28 39 26 41	2,585,58 22,438,66 3,206,73

Par	<b>TXI</b> Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per F	Return
1	Total revenue, gains, and other support per audited financial statements	1	45,091,253
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a 6,746,603		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
		_	
е	Add lines 2a through 2d	2e	12,081,359
3	Subtract line <b>2e</b> from line <b>1</b>	3	33,009,894
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 )		
C	Add lines <b>4a</b> and <b>4b</b>	4c	-3,172,925
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	29,836,969
Par	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s pei	Return.
1	Total expenses and losses per audited financial statements	1	44,009,869
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 995,812		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines 2a through 2d	2e	9,494,679
3	Subtract line <b>2e</b> from line <b>1</b>	3	34,515,190
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII ) 4b 277,138		
c	Add lines <b>4a</b> and <b>4b</b>	4c	277,138
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	34,792,328
Dar	t XIII Supplemental Information		
	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 . V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part t		ide anv additional
	rmation	'	,
	Return Reference Explanation		
See A	dditional Data Table		

Page <b>5</b>		e D (Form 990) 2015	chedule D (F
	ormation <i>(continued)</i>	Supplemental Info	Part XIII
	Explanation	Return Reference	Ret
	1	L	

#### Additional Data

Software Version:

Software ID:

**EIN:** 23-1500085

Name: JEWISH FEDERATION OF GREATER **PHILADELPHIA** 

Supplemental Information Return Reference

Explanation

THE W

COMMU

**FUNDS** 

**GENER** 

PART V, LINE

FINANCI

AL CHARITABLE ORGANIZATIONS

THE JEWISH FEDERATION ENDOWMENT FUNDS ARE INTENDED TO SUPPORT AND PROVIDE A SECURE AL FOUNDATION FOR THE JEWISH COMMUNITY IN GREATER PHILADELPHIA, IN ISRAEL AND AROUND ORLD THE JEWISH FEDERATION IS DEDICATED TO CREATING PERMANENT ASSETS TO PROVIDE THE NITY WITH THE RESOURCES NECESSARY TO SUPPORT A FLOURISHING JEWISH COMMUNITY, NOW AND IN

ALSO SUPPORT LOCAL AGENCIES, SYNAGOGUES, SCHOOLS, NATIONAL JEWISH ORGANIZATIONS AND

E FUTURE OUR ENDOWMENT FUNDS DIRECTLY SUPPORT JEWISH FEDERATION'S ANNUAL CAMPAIGN AND ORITIES IN OUR LOCAL JEWISH COMMUNITY, IN ISRAEL AND AROUND THE WORLD THE ENDOWMENT

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION ADOPTED ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THIS INTERPR ETATION CLARIFIES THE ACCOUNTING FOR INCOME TAXES BY PRESCRIBING THE MINIMUM STANDARD A TA X POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS THE JE WISH FEDERATION AND THE JEWISH EXPONENT HAVE NOT TAKEN ANY UNCERTAIN TAX POSITION THAT SHO ULD BE ACCOUNTED FOR UNDER ASC 740 MANAGEMENT BELIEVES THAT THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS ENDED ON OR PRIOR TO AUGUST 31, 2012 HOWEVE R, TO THE EXTENT NET OPERATING LOSS CARRY-FORWARDS ARE UTILIZED IN THE FUTURE, THESE LOSSE S MAY STILL BE ADJUSTED UPON EXAMINATION

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF NON-PARTICIPATING ASSETS 5,208,643 CHANGE IN VALUE OF CHARITABLE REMAI NDER TRUST 33,388 CHANGE IN VALUE OF CHARITABLE GIFT ANNUITIES -382,235 EQUITY ON LOSS O F EXPONENT -243,714 INVESTMENT MANAGEMENT FEES SHOWN AS EXPENSE -277,138

Cunniamontal Information

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL INCOME RECORDED AS EXPENSE 505,096 RENTAL EXPENSE RECLASSES -3,653,817 INVESTMENT INCOME FROM PARTNERSHIPS -24,204

Return Reference Explanation PART XII. PROVISION FOR UNCOLLECTIBLES 378.437 RENTAL EXPENSE RECLASSES 3.653.817 RENTAL INCOME LINE 2D -OTHER CORDED AS EXPENSE -505.096 FORFEITED GRANTS -27.895 PENSION RELATED CHANGES OTHER THAN LADJUSTMENTS

ERIODIC COSTS 4,961,265 LOSS ON INTEREST RATE SWAP 38,339

Supplemental Information

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT MANAGEMENT FEES SHOWN AS EXPENSE 277,138

efil	e GRAPHIC print - DO N	OT PROCESS	As Filed Da	ta -	DLN:	DLN: 93493195011057		
	EDULE F S1 m 990)	tatement of	Activities (	ed States	OMB No 1545-0047			
	,	► Complete	if the organizatio  Part IV, line:  Attach to	990,	2015			
	ment of the Treasury  Il Revenue Service  ▶ Inform	nation about Schedi		and its instructions is at и	ww.irs.gov/form990.	Open to Public Inspection		
JEWI	of the organization SH FEDERATION OF GREAT ADELPHIA	ER			23-1500085	ntification number		
Pai	<b>General Informat</b> Complete if the org			<b>he United States.</b> orm 990, Part IV, line	14b.			
1	<b>For grantmakers.</b> Does the and other assistance, the used to award the grants	grantees' eligibi			_	√ Yes No		
2	For grantmakers. Describ assistance outside the Un	ited States				nts and other		
3	Activites per Region (The fo	llowing Part I, line	3 table can be d	uplicated if additional sp	ace is needed )			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and findependent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a <b>(f)</b> Total expenditures for and investments in region		
	MIDDLE EAST AND NORTH AFRICA	1	1	PROGRAM SERVICES	PROGRAM OPERATIONS - ISRAEL OFFICE	133,683		
	CENTRAL AMERICA AND THE CARIBBEAN		]	INVESTMENTS		18,039,613		
_						10.172.224		
	Sub-total Total from continuation shee to Part I	ts 0	0			18,173,296		
	Totals (add lines 3a and 3b) perwork Reduction Act Notice,	1	1	<u> </u>	No 50082W <b>Sche</b>	18,173,296 dule F (Form 990) 2015		

_					

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as

tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . .

Schedule F (Form 990) 2015

Page 2

edule F (Form 990) 2015							Page
rt III Grants and Oth Part III can be o	ner Assistance t luplicated if additi	to Individuals ional space is ne	Outside the Unit	ted States. Complete	ıf the organızatıon a	nswered "Yes" to Form	990, Part IV, line 16
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

#### Part V

#### **Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 2	JEWISH FEDERATIONS OF NORTH AMERICA (JFNA) ADOPTED A PROCEDURE FOR ASSISTING JEWISH FEDERA TIONS IN MAKING FOREIGN GRANTS WHICH DO NOT HAVE AN "AMERICAN FRIENDS OF" OFFICE WHICH IS A PUBLIC CHARITY LISTED WITH THE IRS JEWISH FEDERATION DISTRIBUTES ALL FOREIGN GRANTS FRO M DONOR-ADVISED, ENDOWMENT AND OTHER FUNDS IN ACCORDANCE WITH JFNA'S POLICY AS FOLLOWS 1 UPON RECEIPT OF A RECOMMENDATION FOR A GRANT FROM A DONOR-ADVISED FUND OR OTHER SOURCE FO R A FOREIGN GRANT, JEWISH FEDERATION WILL SIND A LETTER VIA BIVAIL TO ISRAEL GRANTS@JEWISHFE DERATIONS ORG OR BY MAIL TO THE ADDRESS BELOW RELAYING THE NAME OF THE PROPOSED GRANTEE, C HECK NUMBER OR WIRE DATE AND THE AMOUNT AND PURPOSE OF THE GRANT TO JFNA SONIA SANTOS THE JEWISH FEDERATIONS OF NORTH AMERICA 25 BROADWAY SUITE 1700 NEW YORK, NY 10004 2 JFNA FOR WARDS THE LETTER, WHICH CONTAINS ALL REQUIRED INFORMATION AND RECOMMENDATION, TO THE UNITE DISRAEL APPEAL ("UIA") WHICH CONDUCTS A PRE-GRANT REVIEW AS PART OF THE PRE-GRANT REVIEW , UIA DETERMINES WHETHER OR NOT THE GRANT WILL BE USED FOR CHARITABLE PURPOSES AND CONFIRM S THAT THE CHARITY IS QUALIFIED TO RECEIVE SUCH GRANT UIA ALSO REQUIRES THE BENEFICIARY TO O SUBMIT OR UPDATE ALL THE REQUIRED LEGAL DOCUMENTS 3 BASED UPON THE RESULTS OF THE UIA REVIEW, JFNA IS INFORMED THAT THE RECOMMENDATION IS APPROVED IF THE JEWISH FEDERATION CHE CK OR WIRE WAS SENT WITH THE LETTER, JFNA INFORMS THE JEWISH FEDERATION THAT THE GRANT WAS APPROVED, DEPOSITS THE CHIECK OR ACCEPTS THE WIRE AND SUBSEQUENTLY, WIRES THE FUNDS TO UIA FOR MISTRIBUTION TO THE FOREIGN GRANT RECIPIENT IF THE CHECK OR WIRE WAS NOT SENT, JFNA INFORMS THE JEWISH FEDERATION THAT THE GRANT WAS APPROVED AND THE PRIOR INVESTIGATION BY UIA, IT IS ANTICIPATED THAT THESE RECOMMENDATIONS UIA FOR STRIBUTION TO THE FOREIGN GRANT RECIPIENT IF THE CHECK OR WIRE WAS NOT SENT, JFNA INFORMS THE JEWISH FEDERATION THAT THE GRANT WAS APPROVED AND THE PRIOR INVESTIGATION BY UIA, IT IS ANTICIPATED THAT THESE RECOMMENDATIONS OF NOTHER HIGH AND THE PROPORE OF THE FROREIGN GRANT ON

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ

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

OMB No 1545-0047

DLN: 93493195011057

2015

Open to Public

Inspection

	ne of the organization	EATED.					Employer ider	tification number			
	VISH FEDERATION OF GR LADELPHIA	EATER					23-1500085				
Pa		ctivities.Complete			tion answered "Yes"	on Form	990, Part IV	, line 17.			
1	Indicate whether the orga	anızatıon raısed funds	through	any of the	e following activities Ch	neck all tl	nat apply				
а	✓ Mail solicitations	✓ Mail solicitations     e    ✓ Solicitation of non-government grants									
b	✓ Internet and email so	olicitations		f	Solicitation of go	vernmen	t grants				
c	▼ Phone solicitations			g	Special fundraisi	ng event	s				
d		ns									
<b>2</b> a	Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising										
b	If "Yes," list the ten high to be compensated at le				sers) pursuant to agree	ments un	der which the fu	ındraiser is			
	(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization			
	SIEGEL MARKETING GROUP PO BOX 686598 CHICAGO, IL 60695	TELEMARKETING SOLICITATIONS	Yes	No No	140,331		35,724	104,607			
Tota	al			<b>&gt;</b>	140,331		35,724	104,607			
	List all states in which the registration or licensing	organization is regist	ered or lı	censed to	o solicit contributions or	has bee	n notified it is e	xempt from			

Pa	rt II Fundraising Events.  Complete if the organization fundraising event contribution	ns and gross income			
	receipts greater than \$5,000	. <b>(a)</b> Event #1	<b>(b)</b> Event #2	(c)O ther events	(d) Total events (add col (a) through
		(event type)	(event type)	(total number)	col <b>(c)</b> )
Revenue	_				
Reve	1 Gross receipts				
	2 Less Contributions				
	4 Cash prizes				
	5 Noncash prizes				
S	<b>6</b> Rent/facility costs				
Expenses	<b>7</b> Food and beverages				
쥧	8 Entertainment				
Direct	9 Other direct expenses				
ā	10 Direct expense summary Add lines 4	-			
Par	t III Gaming.	0 from line 3, column (	d)	<u>•</u>	
	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on	Form 990, Part IV, line	19, or reported mo	re than \$15,000 on
Revenue	_	(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
Re	1 Gross revenue				
ses	<b>2</b> Cash prizes				
ι					
EXP.	3 Noncash prizes				
Direct	4 Rent/facility costs				
<u> </u>	<b>5</b> Other direct expenses				
		<b>Yes</b> %	<b>☐ Yes</b> %_	<b>☐ Yes</b> %	
	6 Volunteerlabor	No	│ No	No	
	7 Direct expense summary Add lines 2	through 5 in column (	d)		
	8 Net gaming income summary Subtrac	ct line 7 from line 1, co	olumn (d)		
9	Enter the state(s) in which the organizat	ion conducts gaming a	activities		
а	Is the organization licensed to conduct		<u>'</u>		Yes No
b	If "No," explain				
10a	Were any of the organization's gaming li				Yes No
b	If "Yes," explain				

Sche	dule G (Form 990 or 990-EZ) 2	015		Page
11	Does the organization conduct	gaming activities with nonmem	bers?	<b>∀</b> es <b>N</b> o
12	Is the organization a grantor, b	peneficiary or trustee of a trust o	or a member of a partnership or other	entity entity
	formed to administer charitable	e gamıng?		Yes No
13	Indicate the percentage of gam	ning activity conducted in		
а	The organization's facility			13a %
b	An outside facility			13b %
14	Enter the name and address of	the person who prepares the or	ganızatıon's gamıng/specıal events b	books and records
	Name ▶			
	Address ►			
15a			hom the organization receives gami	
	revenue?			Yes No
b	If "Yes," enter the amount of g	aming revenue received by the	organization 🕨 \$	and the
	amount of gaming revenue reta	nined by the third party $ hildsymbol{ hinspace}$ \$		
c	If "Yes," enter name and addre	ess of the third party		
	Name ▶			
	Address ▶			
16	Gaming manager information			
	Name ▶			
	Gaming manager compensation	n ▶ \$	<del></del>	
	Description of services provide	ed		
	Director/officer	Employee	☐ Independent contracto	r
17	Mandatory distributions			
а	Is the organization required un	ider state law to make charitable	e distributions from the gaming proce	eeds to
	retain the state gaming license	e?		⊤Yes
b	Enter the amount of distributio	ns required under state law dist	ributed to other exempt organization	•
		pt activities during the tax year	· =	
Par		10b, 15b, 15c, 16, and 17b,	anations required by Part I, line as applicable. Also complete th	
		(5555557.		

efile GRAPHIC print - DO NOT PROCESS DLN: 93493195011057 As Filed Data -OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number JEWISH FEDERATION OF GREATER 23-1500085 PHILADELPHIA Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

181

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIP	34	185,217			
Part IV Supplemental Ir	<b>iformation.</b> Provide the info	ormation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanation				

PART I. LINE 2

GENERAL PURPOSES OF THE JEWISH FEDERATION GRANTS ARE TO BE MADE PRIMARILY, BUT NOT EXCLUSIVELY, TO JEWISH ORGANIZATIONS IN THE GREATER PHILADELPHIA AREA AND AROUND THE WORLD GRANTS SHALL BE USED FOR ONE OF THE FOLLOWING PURPOSES - TO FUND PROGRAMS ALIGNED WITH THE PRIORITIES OF JEWISH FEDERATION, AS DETERMINED BY THE BOARD OF DIRECTORS AND THE VARIOUS FUNDING COMMITTEES OF JEWISH FEDERATION - TO PROVIDE "SEED MONEY" FOR START-UP COSTS FOR NEW OR INNOVATIVE PROJECTS, SCHOLARSHIP/FINANCIAL AID, TRAINING OPPORTUNITIES, AND ONE-TIME SPECIAL PROJECTS THE FOCUS WILL BE PRIMARILY ON THE SOCIAL, WELFARE, HEALTH, EDUCATION, COMMUNITY RELATIONS, AND CULTURAL FIELDS WITHIN THE PHILADELPHIA JEWISH AND GENERAL COMMUNITY - TO RESPOND TO LOCAL, NATIONAL AND INTERNATIONAL EMERGENCY NEEDS LIMITATIONS - GRANTS ARE GENERALLY NOT AVAILABLE FOR OPERATING PURPOSES OR ADDITIONS TO OTHER ENDOWMENT FUNDS ALL GRANTS MUST BE CONSISTENT WITH THE PURPOSES OF JEWISH FEDERATION, MUST NOT BE PROHIBITED BY ANY LIMITATION ON THE ABILITY OF JEWISH FEDERATION TO DISBURSE FUNDS AND MUST COMPLY WITH ANY RESTRICTIONS OR LIMITATIONS WHICH ARE OR MAY BE ADOPTED BY THE BOARD OF DIRECTORS OF JEWISH FEDERATION THE REQUESTING GRANTEE MUST DEMONSTRATE ITS FUNDING EXPECTATIONS, CAPABILITIES AND INTENTIONS FOR THE CONTINUITY OF PROGRAMS/INITIATIVES THAT ARE PROPOSED TO EXIST BEYOND THE PERIOD(S) APPROVED THROUGH THIS GRANTS PROCESS - IT IS EXPECTED THAT ORGANIZATIONS SEEKING GRANTS SHALL SHARE IN FINANCING SUCH PROJECTS/INITIATIVES OTHER SOURCES OF FUNDING FOR A GRANTEE'S GRANT REQUEST ARE TO BE CONSIDERED DURING THE GRANTS REVIEW PROCESS - GRANTS SHALL GENERALLY BE A SOURCE OF ORIGINAL SUPPORT FOR PROJECTS AND NOT A REPLACEMENT OF OTHER SOURCES OF SUPPORT - IF ANY ORGANIZATION DOES NOT BEGIN THE FUNDED PROJECT/INITIATIVE WITHIN AN INDICATED TIME PERIOD OF RECEIVING THE GRANT APPROVAL, THE FUNDING FOR THE GRANT WILL AUTOMATICALLY BE REVOKED, UNLESS THERE IS PRIOR CONSULTATION BETWEEN THE GRANTEE AND JEWISH FEDERATION - JEWISH FEDERATION MAY IMPOSE CONDITIONS, AS IT DEEMS APPROPRIATE ON THE GRANTING OF FUNDS TO ANY GRANTEE GRANT PROCESS IN GENERAL, AN ANNUAL REQUEST FOR PROPOSALS WILL BE MADE IN ALIGNMENT WITH THE TOP PRIORITIES OF JEWISH FEDERATION, AS DETERMINED BY THE BOARD OF DIRECTORS AND THE VARIOUS FUNDING COMMITTEES OF JEWISH FEDERATION THE REQUEST FOR PROPOSALS WILL INCLUDE GOALS, MEASURABLE OUTCOMES AND TARGET POPULATIONS THEY WILL BE POSTED ON JEWISH FEDERATION'S WEBSITE, PUBLISHED IN THE JEWISH EXPONENT AND DISTRIBUTED VIA E-MAIL TO PREVIOUS PARTNERS JEWISH FEDERATION MAY UTILIZE A LETTER OF INTENT PROCESS IN ORDER TO PROMOTE AN EFFICIENT PROCESS FOR INQUIRING AGENCIES AND INTERNAL COMMITTEES. APPROPRIATE SUB-COMMITTEES WILL REVIEW GRANT REQUESTS AND EITHER REJECT OR RECOMMEND THEIR APPROVAL BASED ON ALIGNMENT WITH JEWISH FEDERATION PRIORITIES, PREVIOUS EVALUATION OF THE SPECIFIC PROGRAM AND/OR PREVIOUS EVALUATION OF OTHER PROGRAMS AT THE APPLICANT AGENCY FUNDING RECOMMENDATIONS ARE FURTHER REVIEWED AND PRIORITIZED BY THE COMMISSIONS (WHICH ARE SUB-COMMITTEES OF THE POLICY STRATEGY & FUNDING (PSF) COMMITTEE) AND THE PSF COMMITTEE THE PSF COMMITTEE PROVIDES A FINAL RECOMMENDATION TO THE BOARD OF DIRECTORS AND THE BOARD OF TRUSTEES. AFTER BOARD ACTION ON THE PSF COMMITTEE RECOMMENDATION, APPLICANTS SHALL BE NOTIFIED PROMPTLY OF THE DECISION REGARDING THEIR APPLICATION INCLUDED IN THE RECOMMENDATIONS MAY BE A POOL OF FUNDS AS DISCRETIONARY FUNDS FOR EMERGENCY AND OTHER REQUESTS FROM ORGANIZATIONS DUE TO UNFORESEEN CIRCUMSTANCES THAT ARISE DURING THE FUNDING PERIOD THE APPROVAL FOR USING THESE FUNDS IS UNDER THE DIRECTION OF THE PSF COMMITTEE PAYOUT SCHEDULE A PAYMENT SCHEDULE WILL BE SPECIFIED IN A FORMAL GRANT AGREEMENT CONSULTATION WITH JEWISH FEDERATION IS REQUIRED PRIOR TO ANY USE OF THESE FUNDS IN A MANNER OTHER THAN AS APPROVED UNUSED FUNDS MUST BE RETURNED TO JEWISH FEDERATION PROGRAM EVALUATION PROPOSALS MUST GENERALLY INCORPORATE A METHOD OF EVALUATION TO DETERMINE THE EFFECTIVENESS OF THE PROPOSED PROGRAM AGAINST THE MEASURABLE OBJECTIVES STATED IN THE REQUEST FOR PROPOSALS IF REQUIRED, ORGANIZATIONS SHOULD DESIGNATE A PROJECT DIRECTOR AND/OR AN OVERSIGHT COMMITTEE TO MONITOR THE OBJECTIVES AND GOALS OF THE PROGRAM DEADLINES GRANT PROPOSALS MUST BE SUBMITTED IN ACCORDANCE WITH THE ANNUAL SCHEDULE JEWISH FEDERATION IS NOT BOUND TO APPROVE AN APPLICATION NOR DOES IT ASSUME ANY OBLIGATION TO AN APPLICANT BECAUSE OF MEETING SCHEDULE CHANGES MONITORING - INTERIM/FINAL REPORTS EVALUATION AND PERIODIC PROGRESS REPORTS ARE REQUIRED FOR ALL GRANTS IN ORDER TO ENSURE THAT SUCH GRANTS ARE USED FOR THE PROPER PURPOSES AND TO MEASURE IMPACT OF THOSE EFFORTS CONTINUED FUNDING IS CONTINGENT UPON SATISFACTORY PROGRESS IN ACHIEVING THE PROJECT GOALS. UPON COMPLETION OF ALL FUNDED PROJECTS, A FINAL REPORT MUST BE SUBMITTED INDICATING BOTH THE USE OF THE FUNDS AND THE PROGRAM RESULTS REPORTS ARE REVIEWED BY JEWISH FEDERATION STAFF, COMMISSIONS AND PSF IN ORDER TO HELP DETERMINE FUTURE FUNDING DECISIONS

PROGRAM ALLOCATIONS GRANT MAKING AND MONITORING POLICIES & PROCEDURES - GRANTS SHALL BE CONSISTENT WITH THE

**ENDOWMENT FUNDS GRANTMAKING &** MONITORING POLICIES AND **PROCEDURES** 

ARRANGEMENTS AND ENTITIES ("ENDOWMENTS" HEREIN) THE PURPOSE OF JEWISH FEDERATION'S ENDOWMENT FUNDS ARE  $\,\,$  1  $\,$  TO PROVIDE FOR EXPANDING NEEDS AND EMERGENCIES IN THE JEWISH COMMUNITY, 2 TO ASSURE THE CONTINUITY OF JEWISH FEDERATION'S PHILANTHROPIC MISSION, AND 3 TO PROVIDE FINANCIAL SECURITY AND STABILITY FOR JEWISH FEDERATION'S FUTURE ACCORDING TO NATIONALLY ACCEPTED ENDOWMENT PRINCIPLES CONCERNING GROWTH, SPENDING, AND MANAGEMENT IN ORDER TO ADMINISTER A PROGRAM TO RAISE AND MANAGE ENDOWMENTS FOR JEWISH FEDERATION AND SUPERVISE DISTRIBUTIONS THEREFROM, JEWISH FEDERATION ESTABLISHED THE FEDERATION ENDOWMENTS CORPORATION ("FEC" HEREIN) FEC WILL OVERSEE JEWISH FEDERATION'S ENDOWMENT ASSETS AS HEREIN DEFINED AND WILL NOT MANAGE OR DISTRIBUTE ANY FUNDS OF ITS OWN, OR OF ANY OTHER ENTITY OR PERSON, UNLESS EXPRESSLY APPROVED BY THE BOARD OF DIRECTORS OF FEC OR BY THE BOARD OF TRUSTEES OF JEWISH FEDERATION CATEGORIES OF THE ENDOWMENTS A UNRESTRICTED ENDOWMENT THE TERM UNRESTRICTED ENDOWMENT EMBRACES VARIOUS ENDOWMENT FUNDS, GIVEN TO JEWISH FEDERATION FROM TIME TO TIME FOR THE GENERAL UNRESTRICTED PURPOSES OF JEWISH FEDERATION A PERCENTAGE OF SUCH FUNDS IS ANNUALLY AVAILABLE FOR DISTRIBUTION FOR THE GENERAL PURPOSES OF JEWISH FEDERATION, AS AUTHORIZED BY JEWISH FEDERATION'S BOARD OF TRUSTEES IT IS INTENDED THAT THE UNRESTRICTED ENDOWMENT CONTINUE TO GROW AND THAT THE AVAILABLE AUTHORIZED PERCENTAGE BE EXCEEDED ONLY AS APPROVED BY THE BOARD OF DIRECTORS THESE FUNDS DO NOT INCLUDE FUNDS RESTRICTED BY WILL, DONOR OR A COURT AS TO USE OF PRINCIPAL AND/OR INCOME FOR ANY SPECIFIC PURPOSE THE UNRESTRICTED ENDOWMENT ALSO DOES NOT INCLUDE PHILANTHROPIC FUNDS, RESTRICTED ENDOWMENT FUNDS, TRUSTS OR SUPPORTING FOUNDATIONS ADMINISTRATION OF THE UNRESTRICTED ENDOWMENT IS GOVERNED BY THESE POLICIES AND UNLESS APPROVED BY THE BOARD OF TRUSTEES OF JEWISH FEDERATION, ALL UNRESTRICTED ENDOWMENT FUNDS SHALL BE INVESTED ACCORDING TO POLICIES ESTABLISHED BY THE INVESTMENT COMMITTEE B RESTRICTED ENDOWMENT THE TERM RESTRICTED ENDOWMENT EMBRACES FUNDS GIVEN TO JEWISH EDERATION, RESTRICTED AS TO THE USE OF INCOME AND PRINCIPAL FOR A DEFINED PURPOSE, OR SPECIAL PURPOSE FUNDS THE RESTRICTED ENDOWMENT INCLUDES FUNDS RESTRICTED BY WILL, DONOR, OR COURT ORDER ADMINISTRATION OF THE RESTRICTED ENDOWMENT IS GOVERNED BY THESE POLICIES AND, UNLESS APPROVED BY THE BOARD OF TRUSTEES OF JEWISH FEDERATION, ALL RESTRICTED ENDOWMENT FUNDS SHALL BE INVESTED ACCORDING TO POLICIES ESTABLISHED BY THE INVESTMENT COMMITTEE MONITORING PROCEDURES FOR DOMESTIC GRANTS FROM ENDOWMENT FUNDS 1 UPON RECEIPT OF A RECOMMENDATION FOR A GRANT FROM AN ENDOWMENT FUND FOR GRANTS TO A US ORGANIZATION, JEWISH FEDERATION CONDUCTS A PRE-GRANT REVIEW TO DETERMINE WHETHER THE FUNDS WILL BE USED FOR CHARITABLE PURPOSES AND WHETHER THE ORGANIZATION IS A QUALIFIED PUBLIC CHARITY UNDER IRS GUIDELINES 2 IF JEWISH FEDERATION DETERMINES THAT THE FUNDS WILL BE USED FOR CHARITABLE PURPOSES AND THAT THE ORGANIZATION IS A QUALIFIED PUBLIC CHARITY UNDER IRS GUIDELINES, THE GRANT IS APPROVED 3 IF JEWISH FEDERATION DETERMINES THAT THE FUNDS WILL BE USED FOR OTHER THAN CHARITABLE PURPOSES OR THAT THE ORGANIZATION IS NOT A QUALIFIED PUBLIC CHARITY UNDER IRS GUIDELINES, THE GRANT IS DECLINED AND THE DONOR IS NOTIFIED IN WRITING

THE JEWISH FEDERATION OWNS, IS AFFILIATED WITH, OR IS FIDUCIARY OF A WIDE ARRAY OF ENDOWMENT RELATED FUNDS, TRUSTS,

DONOR ADVISED FUNDS GRANTMAKING AND MONITORING POLICIES AND **PROCEDURES** 

JEWISH FEDERATION MAINTAINS APPROXIMATELY 250 DONOR-ADVISED "PHILANTHROPIC FUNDS" SUCH FUNDS MAY BE ESTABLISHED BY A MINIMUM GIFT TO JEWISH FEDERATION OF \$5.000 A SEPARATE FUND BEARING THE DONOR'S NAME (OR ANOTHER NAME CHOSEN BY THE DONOR) IS CREATED AND THE GIFT IS INVESTED A JEWISH FEDERATION'S PHILANTHROPIC FUND PROGRAM IS GOVERNED BY JEWISH FEDERATION'S "PHILANTHROPIC FUND PROCEDURES AND OPERATION GUIDELINES" DETAILED BELOW B PHILANTHROPIC FUNDS ARE ESTABLISHED BY A WRITTEN AGREEMENT BETWEEN JEWISH FEDERATION AND THE DONOR C UPON THE ESTABLISHMENT OF THE NEW FUND, THE DONOR RECEIVES A "NEW FUND PACKAGE", WHICH INCLUDES A COVER LETTER, COPIES OF JEWISH FEDERATION'S PHILANTHROPIC FUND PROGRAM GUIDE, AND AN INVESTMENT MODEL SELECTION FORM D THERE ARE SIX DIFFERENT INVESTMENT MODELS AND THE DONOR CAN CHOOSE TO INVEST IN ONE OR ALL SIX IN WHATEVER PERCENTAGES THEY PREFER E TO RECOMMEND A GRANT FROM A PHILANTHROPIC FUND, A DONOR MUST SUBMIT A WRITTEN, SIGNED, RECOMMENDATION FORM OR SUBMIT THE RECOMMENDATION THROUGH A SECURE WEB PLATFORM USING UNIQUE LOGIN AND PASSWORD CREDENTIALS THE DONOR MUST CONFIRM THAT THE DISTRIBUTION WOULD NOT SATISFY A LEGAL OBLIGATION OF THE DONOR AND THE DONOR'S WAIVER OF ALL BENEFITS IN CONNECTION WITH THE GRANT F UPON RECEIPT OF THE GRANT RECOMMENDATION, VETTING AND DUE DILIGENCE IS PERFORMED FOR THE RECOMMENDED GRANTEE TO CONFIRM ITS STATUS AS A PUBLIC CHARITY ACCORDING TO IRS GUIDELINES IF A PROPOSED GRANTEE IS NOT A PUBLIC CHARITY PER IRS GUIDELINES OR THE FUNDS WILL NOT BE USED FOR THE CHARITABLE PURPOSES OF JEWISH FEDERATION, THE GRANT IS NOT MADE THE DONOR IS NOTIFIED BY LETTER AND COPIES OF SUCH LETTERS ARE KEPT ON FILE IF THE PROPOSED GRANT IS TO A FOREIGN ORGANIZATION THAT DOES NOT MAINTAIN AN "AMERICAN FRIENDS" OFFICE WITH 501 (C)(3) STATUS, THE GENERAL MONITORING PROCESS FOR FOREIGN GRANTS IS FOLLOWED G CHECKS ARE DISTRIBUTED DIRECTLY TO THE CHARITIES WITH A TRANSMITTAL LETTER THE CHARITY IS NOTIFIED VIA THE TRANSMITTAL LETTER THAT IN CASHING THE CHECK, THE CHARITY ACKNOWLEDGES NO TICKETS OR BENEFITS INURED TO THE DONOR, NOR IS THE GIFT IN SATISFACTION OF A PLEDGE H DONORS RECEIVE QUARTERLY STATEMENTS FOR THE PHILANTHROPIC FUND AND MAY ALSO CHECK FUND BALANCES AND ACTIVITY DAILY VIA THE WEBSITE I GRANTS FROM PHILANTHROPIC FUNDS TO INDIVIDUALS ARE NOT PERMITTED, EXCEPT FOR SCHOLARSHIPS AND OTHER AWARDS AS PERMITTED IN ACCORDANCE WITH INTERNAL REVENUE CODE JEWISH FEDERATION'S SCHOLARSHIP FUND GUIDELINES AND PROCEDURES LISTED BELOW SHALL GOVERN ANY SUCH AWARDS FROM AN ENDOWMENT FUND THAT COULD REASONABLY BE CONSIDERED TO BE DONOR-ADVISED

SCHOLARSHIP FUND **GUIDELINES AND PROCEDURES** 

THE JEWISH FEDERATION THROUGH THE FEDERATION ENDOWMENTS CORPORATION ("FEC") MAY, IN ITS DISCRETION, ADMINISTER ENDOWMENT FUNDS WHICH AWARD SCHOLARSHIP AND OTHER GRANTS TO INDIVIDUALS SUCH GRANTS WILL BE PAID EITHER TO THE INDIVIDUAL DIRECTLY OR TO A QUALIFIED EDUCATIONAL INSTITUTION ON THE INDIVIDUAL'S BEHALF IN CASES WHERE THE DONORS OR THEIR DESIGNEES (INDIVIDUALS WITH WHOM THE DONOR HAS HAD A FAMILY OR EMPLOYMENT RELATIONSHIP, INCLUDING ATTORNEYS) MAY MAKE RECOMMENDATIONS AS TO THE RECIPIENTS OF THE SCHOLARSHIP GRANTS, THROUGH INVOLVEMENT ON THE SCHOLARSHIP SELECTION ADVISORY COMMITTEE, FOR EXAMPLE, SUCH THAT THE FUND WOULD REASONABLY BE CONSIDERED TO BE A DONOR-ADVISED FUND UNDER FEDERAL LAW, THE SCHOLARSHIP FUND GUIDELINES AND PROCEDURES APPLY

COLUMN B

THE NUMBER OF RECIPIENTS IS BASED ON THE NUMBER OF GRANTS TO INDIVIDUAL RECIPIENTS SCHEDULE I, PART III,

#### **Additional Data**

YARDLEY,PA 19067

ABRAMS HEBREW ACADEMY

YARDLEY, PA 19067

31 WEST COLLEGE AVENUE

21-6001415

Software ID: Software Version:

**EIN:** 23-1500085

Name: JEWISH FEDERATION OF GREATER

PHILADELPHIA

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of

501 (C)(3)

organization or government		ıf applıcable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
AAUW MAKEFIELD AREA BRANCH PA INC 178 FORREST DRIVE HOLLAND,PA 18966	46-3627182	501 (C)(3)	10,000				GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ABRAMS HEBREW ACADEMY 31 WEST COLLEGE AVENUE		501 (C)(3)	99,187				GENERAL AND/OR PROGRAM SUPPORT

4,000

(h) Purpose of grant

GENERAL AND/OR

FUNDS

PROGRAM SUPPORT -DONOR ADVISED

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) ADOPT-AN-AUTHORING 14-1844572 501 (C)(3) 6,000 GENERAL AND/OR 9447 COVENTRY LAKE PROGRAM SUPPORT COURT WEST PALM BEACH, FL RALAND/OR

33411					
ADVANCING WOMEN PROFESSIONALS AND THE JEWISH COMMUNITY INC 520 EIGHTH AVENUE 4TH FLOOR	13-4190787	501 (C)(3)	6,000		GENERA PROGRA DONOR FUNDS

501 (C)(3)

AISH HATORAH-METRO

50 MONTGOMERY AVENUE

BALA CYNWYD, PA 19004

PHILADELPHIA INC

23-2854127

RAM SUPPORT -RADVISED NEW YORK, NY 10018

10,581

GENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) ALBERT EINSTEIN MEDICAL 23-1396794 501 (C)(3) 5,378 GENERAL AND/OR CENTER PROGRAM SUPPORT 5501 OLD YORK ROAD PHILADELPHIA, PA 191413018 ALBERT EINSTEIN MEDICAL 23-1396794 501 (C)(3) 20.850 IGENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED

CENTER 5501 OLD YORK ROAD PHILADELPHIA, PA 191413018

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

1212 MELROSE AVENUE MELROSE PARK, PA 19027

FUNDS ALLIANCE FOR 27-5247875 501 (C)(3) 20,000 GENERAL AND/OR CONTINUING RABBINIC PROGRAM SUPPORT EDUCATION LTD

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) AMERICAN ASSOCIATES 23-7270753 501 (C)(3) 28,313 GENERAL AND/OR BEN GURION UNIVERSITY PROGRAM SUPPORT -OF THE NEGEV DONOR ADVISED 1001 AVENUE OF THE FUNDS AMERICAS 19TH FLOOR NEW YORK, NY 10018 AMERICAN CIVIL 13-6213516 501 (C)(3) 5,600 GENERAL AND/OR LIBERTIES UNION PROGRAM SUPPORT -

(g) Description of

(h) Purpose of grant

FOUNDATION INC. DONOR ADVISED 125 BROAD ST 18TH FLOOR FUNDS NEW YORK, NY 10004 AMERICAN COMMITTEE 13-1623886 501 (C)(3) 5,100 FOR THE WEIZMANN

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

NEW YORK, NY 10017

**(b)** EIN

GENERAL AND/OR PROGRAM SUPPORT INSTITUTE OF SCIENCE INC 633 THIRD AVENUE 20TH FI

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) AMERICAN COMMITTEE 13-1623886 501 (C)(3) 3,360 GENERAL AND/OR FOR THE WEIZMANN PROGRAM SUPPORT -INSTITUTE OF SCIENCE DONOR ADVISED INC FUNDS 633 THIRD AVENUE 20TH LAND/OR

FL NEW YORK, NY 10017					
AMERICAN FRIENDS OF ELI PO BOX 12 MERION STATION, PA 19066	52-2171745	501 (C)(3)	1,250		GENERAL AND/OR PROGRAM SUPPORT

10,000

GENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

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

501 (C)(3)

AMERICAN FRIENDS OF ELI

MERION STATION, PA

PO BOX 12

19066

52-2171745

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) AMERICAN FRIENDS OF 20-8202424 501 (C)(3) 31,250 GENERAL AND/OR LEKET ISRAEL PROGRAM SUPPORT -PO BOX 2090 DONOR ADVISED

TEANECK, NJ 076661490					FUNDS
AMERICAN FRIENDS OF LIBI 420 HARVARD STREET BROOKLINE,MA 02446	32-0081620	501 (C )(3)	167,713		GENERAL AND/OR PROGRAM SUPPORT
A MEDICAN EDIENDO OF	12 1700710	FO1 (C ) (2)	36.650		CENEDAL AND OR

AMERICAN FRIENDS OF 13-1/90/19 501 (C)(3) 26,650 GENERAL AND/OR MAGEN DAVID ADOM PROGRAM SUPPORT -352 7TH AVENUE 4TH DONOR ADVISED FUNDS

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

FLOOR NEW YORK, NY 100015012

**(b)** EIN (c) IRC section (d) A mount of cash (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) AMERICAN FRIENDS OF 04-3106173 501 (C)(3) 5.960 GENERAL AND/OR NISHMAT PROGRAM SUPPORT -520 EIGHTH AVENUE 4TH DONOR ADVISED FLOOR FUNDS NEW VODE NV 10010 /O R

NEW TORK, NT 10016					
AMERICAN FRIENDS OF THE ISRAEL MUSEUM 545 FIFTH AVENUE SUITE 920 NEW YORK,NY 10017	23-7182582	501 (C)(3)	14,425		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

501 (C)(3) 8,250 GENERAL AND/OR AMERICAN FRIENDS OF 13-2946608 YESHIVA DMIR INC PROGRAM SUPPORT

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

(a) Name and address of

5227 NEW UTRECHT AVE BROOKLYN, NY 11219

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) AMERICAN FRIENDS OF 13-2946608 501 (C)(3) 1,000 GENERAL AND/OR YESHIVA DMIR INC PROGRAM SUPPORT -

(g) Description of

(h) Purpose of grant

GENERAL AND/OR PROGRAM SUPPORT -

DONOR ADVISED

FUNDS

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

(d) A mount of cash

(c) IRC section

501 (C)(3)

(a) Name and address of

AMERICAN IEWISH

165 EAST 56TH STREET

NEW YORK, NY 10022

COMMITTEE

**(b)** EIN

13-5563393

5227 NEW UTRECHT AVE BROOKLYN,NY 11219					DONOR ADVISED FUNDS
AMERICAN JEWISH COMMITTEE 165 EAST 56TH STREET NEW YORK,NY 10022	13-5563393	501 (C)(3)	1,211		GENERAL AND/OR PROGRAM SUPPORT

10,280

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) AMERICAN JEWISH JOINT 13-1656634 501 (C)(3) 81.000 GENERAL AND/OR PROGRAM SUPPORT -DISTRIBUTION COMMITTEE DONOR ADVISED 711 THIRD AVENUE 10TH FUNDS

(g) Description of

(h) Purpose of grant

GENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

FLOOR NEW YORK,NY 10017					
AMERICAN SOCIETY FOR TECHNION 55 EAST 59TH STREET NEW YORK, NY 10022	13-0434195	501 (C)(3)	5,100		GENERAL AND/OR PROGRAM SUPPORT

23,006

(d) A mount of cash

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

(c) IRC section

501 (C)(3)

(a) Name and address of

AMERICAN SOCIETY FOR

55 EAST 59TH STREET

NEW YORK, NY 10022

TECHNION

**(b)** EIN

13-0434195

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) AMERICAN SOCIETY FOR 52-1467954 501 (C)(3) 25,000 GENERAL AND/OR THE PROTECTION OF PROGRAM SUPPORT -NATURE IN ISRAEL (ASPNI) DONOR ADVISED 28 ARRANDALE AVENUE FUNDS GREAT NECK, NY LAND/OR M SUPPORT -

110241804					
AMIT 817 BROADWAY 4TH FLOOR NEW YORK,NY 10003	13-5631502	501 (C)(3)	5,860		GENERAL PROGRAM DONOR A

ADVISED FUNDS ANDREW MCDONOUGH B 42-1741037 501 (C)(3) 5,850 GENERAL AND/OR

FOUNDATION PROGRAM SUPPORT -

101 ROCKLAND CIRCLE

DONOR ADVISED WILMINGTON, DE 19803 FUNDS

**(b)** EIN (c) IRC section (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) ANTI-DEFAMATION 13-1818723 501 (C)(3) 5,100 IGENERAL AND/OR LEAGUE PROGRAM SUPPORT

FUNDS

605 THIRD AVENUE NEW YORK, NY 10158					
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE	13-1818723	501 (C)(3)	3,650		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

FUNDS 13-2887439

(d) A mount of cash

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

(a) Name and address of

NEW YORK, NY 101583560

NEW YORK, NY 10158 ANTI-DEFAMATION 501 (C)(3) 220,200 GENERAL AND/OR LEAGUE FOUNDATION PROGRAM SUPPORT -605 THIRD AVENUE DONOR ADVISED

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) BENCHMARK SCHOOL 23-1728895 501 (C)(3) 15,000 GENERAL AND/OR 2107 NORTH PROVIDENCE PROGRAM SUPPORT -

(g) Description of

(h) Purpose of grant

ROAD MEDIA,PA 19063					DONOR ADVISED FUNDS
BETH JACOB HEBREW TEACHERS COLLEGE INC	13-2507037	501 (C)(3)	5,450		GENERAL AND/OR PROGRAM SUPPORT

1213 ELM AVENUE BROOKLYN,NY 11230					PROGRAM SUPP
BETH SHOLOM	02-0806071	501 (C)(3)	18,870		GENERAL AND/C

) / O R PROGRAM SUPPORT -

CONGREGATION 8231 OLD YORK ROAD DONOR ADVISED

ELKINS PARK, PA 19027 FUNDS

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

**(b)** EIN

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) BIRTHRIGHT ISRAEL 13-4092050 501 (C)(3) 150,900 GENERAL AND/OR DDOCDAM CHDDODT ECHNIDATION

501 (C)(3)

B'NAI B'RITH YOUTH

800 EIGHTH STREET NW WASHINGTON, DC 20001

ORGANIZATION

31-1794932

PO BOX 5892 HICKSVILLE,NY 11801					PROGRAM SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION PO BOX 5892 HICKSVILLE,NY 11801	13-4092050	501 (C)(3)	18,900		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

GENERAL AND/OR

PROGRAM SUPPORT

30,100

organization if applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 501 (C)(3) 100 B'NAI B'RITH YOUTH 31-1794932 IGENERAL AND/OR ORGANIZATION IPROGRAM SUPPORT -SOU EIGHTH STDEET NIM DONOR ADVISED FUNDS

30,000

15,000

(e) A mount of non- (f) Method of valuation

(h) Purpose of grant

GENERAL AND/OR

IGENERAL AND/OR

PROGRAM SUPPORT

(g) Description of

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

(d) A mount of cash

(c) IRC section

501 (C)(3)

501 (C)(3)

WASHINGTON, DC 20001	
BOARD OF RABBIS OF	23-1571787
GREATER PHILADELPHIA	
2100 ARCH STREET	

**(b)** EIN

23-1352052

(a) Name and address of

BOY SCOUTS OF AMERICA

1485 VALLEY FORGE ROAD

WAYNE, PA 19087

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) CAMP RAMAH IN THE 23-1607236 501 (C)(3) 1,596 GENERAL AND/OR POCONOS PROGRAM SUPPORT 2100 ARCH STREET LAND/OR AM SUPPORT -

PROGRAM SUPPORT -

DONOR ADVISED

FUNDS

PHILADELPHIA, PA 19103					
CAMP RAMAH IN THE POCONOS 2100 ARCH STREET PHILADELPHIA,PA 19103	23-1607236	501 (C )(3)	22,036		GENERAL AND/OR PROGRAM SUPPORT DONOR ADVISED FUNDS
CHABAD LUBAVITCH OF	20-0072887	501 (C)(3)	21,800		GENERAL AND/OR

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

THE MAIN LINE INC
625 MONTGOMERY AVENUE

19066

MERION STATION, PA

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) CHALLAH FOR HUNGER 26-1540827 501 (C)(3) 18,375 GENERAL AND/OR 201 S CAMAC STREET PROGRAM SUPPORT FLOOR 2 PHILADELPHIA, PA 19107 CHEDER CHABAD -27-0854753 501 (C)(3) 46,596 GENERAL AND/OR **JPPORT** 

PHILADELPHIA 625 MONTGOMERY AVENUE MERION STATION,PA 19072						PROGRAM SUPPORT
COMMITTEE FOR THE RESCUE OF ISRAEL'S	22-3431457	501 (C)(3)	200,000		1	GENERAL AND/OR PROGRAM SUPPORT -

BABIES DONOR ADVISED 333 WEST 86TH STREET FUNDS **SUITE 1003** 

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

NEW YORK, NY 10024

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) CONGREGATION ADATH 23-1484192 501 (C)(3) 5,100 GENERAL AND/OR PROGRAM SUPPORT JESHURUN 7763 OLD YORK ROAD

AVENUE

18045

PALMER TOWNSHIP, PA

ELKINS PARK, PA 19027					
CONGREGATION ADATH JESHURUN 7763 OLD YORK ROAD ELKINS PARK,PA 19027	23-1484192	501 (C)(3)	12,286		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION BETH AVRAHAM 439 SOUTH NULTON	20-1161320	501 (C)(3)	5,500		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

FUNDS

**(b)** EIN (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 3,824 CONGREGATION BETH EL-23-1555443 501 (C)(3) GENERAL AND/OR NER TAMID PROGRAM SUPPORT

(a) Description of

FUNDS

715 PAXON HOLLOW ROAD BROOMALL,PA 19008					
CONGREGATION BETH EL- NER TAMID 715 PAXON HOLLOW ROAD	23-1555443	501 (C)(3)	2,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

BROOMALL, PA 19008 FUNDS

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

CONGREGATION BETH OR 23-6005909 51,000

501 (C)(3)

GENERAL AND/OR 239 WELSH ROAD PROGRAM SUPPORT -

MAPLE GLEN, PA 19002 DONOR ADVISED

**(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 23-1489807 501 (C)(3) 2,913 CONGREGATION KENESETH GENERAL AND/OR TCDAFI DDOCDAM SHDDODT

501 (C)(3)

(a) Name and address of

ALLENTOWN, PA 18104

CONGREGATION OHEV

2 CHESTER ROAD WALLINGFORD, PA 19086

SHALOM

23-1457981

2227 CHEW STREET ALLENTO WN, PA 18104					FROGRAM SOFFORT
CONGREGATION KENESETH ISRAEL 2227 CHEW STREET	23-1489807	501 (C)(3)	7,168		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

10,672

FUNDS

GENERAL AND/OR

PROGRAM SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance CONGREGATION OHEV 23-1457981 501 (C)(3) 750 GENERAL AND/OR SHALOM PROGRAM SUPPORT -ADVISED

FUNDS

2 CHESTER ROAD WALLINGFORD,PA 19086					DONOR AD FUNDS
CONGREGATION RODEPH SHALOM 615 NORTH BROAD STREET PHILADELPHIA,PA	23-1365228	501 (C)(3)	1,541		GENERAL A PROGRAM

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

PHILADELPHIA, PA

191232495

LAND/OR M SUPPORT 191232495 CONGREGATION RODEPH 23-1365228 501 (C)(3) 18,700 GENERAL AND/OR SHALOM PROGRAM SUPPORT -615 NORTH BROAD STREET DONOR ADVISED

organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) CYSTIC FIBROSIS 501 (C)(3) 16,000 23-2573569 GENERAL AND/OR PROGRAM SUPPORT FOUNDATION

(g) Description of

(h) Purpose of grant

PROGRAM SUPPORT

2004 SPROUL ROAD 208 BROOMALL,PA 19008					
CYSTIC FIBROSIS FOUNDATION 2004 SPROUL ROAD 208	23-2573569	501 (C)(3)	200		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

BROOMALL, PA 19008 FUNDS DOCTORS WITHOUT 13-3433452 501 (C)(3) 328 GENERAL AND/OR

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

BORDERS USA INC

333 7TH AVE 2ND FLOOR NEW YORK, NY 100015004 **(b)** EIN

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) DOCTORS WITHOUT 13-3433452 501 (C)(3) 5,450 GENERAL AND/OR PROGRAM SUPPORT -BORDERS USA INC. 333 7TH AVE 2ND FLOOR DONOR ADVISED NEW YORK, NY 100015004 FUNDS 13-2670365 501 (C)(3) 5,600 GENERAL AND/OR

EMUNAH OF AMERICA INC. 363 7TH AVENUE SUITE PROGRAM SUPPORT 205 NEW YORK, NY 10001 EVERGREEN STATE 91-0981488 501 (C)(3) 38,000

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

OLYMPIA, WA 98505

GENERAL AND/OR COLLEGE FOUNDATION PROGRAM SUPPORT -2700 EVERGREEN PKWY NW DONOR ADVISED 11113FUNDS

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 23-1352554 501 (C)(3) 15,240 FEDERATION EARLY GENERAL AND/OR PROGRAM SUPPORT LEARNING SERVICE (FELS) 10700 JAMISON AVENUE

PHILADELPHIA,PA 19116					
FEDERATION EARLY LEARNING SERVICE (FELS) 10700 JAMISON AVENUE PHILADELPHIA DA 19116	23-1352554	501 (C )(3)	4,200		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

THILADELIHIA, TA IJIIO FEDERATION HOUSING INC. 23-1733766 501 (C)(3) 141,000

บเทบอ

GENERAL AND/OR 8900 ROOSEVELT PROGRAM SUPPORT BOULEVARD

PHILADELPHIA, PA 19115

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

(a) Name and address of (b) EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 26,618 FEMALE HEBREW 23-6269039 501 (C)(3) IGENERAL AND/OR BENEVOLENT SOCIETY PROGRAM SUPPORT 2125 DELANCEY PLACE

501 (C)(3)

FIRST SERVE - NM INC

SANTA FE, NM 87594

PO BOX 31904

27-0044395

PHILADELPHIA,PA 19103					
FEMALE HEBREW BENEVOLENT SOCIETY 2125 DELANCEY PLACE PHILADELPHIA,PA 19103	23-6269039	501 (C)(3)	6,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

6,500

GENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) FOOD FOR THE POOR INC 59-2174510 501 (C)(3) 6,000 IGENERAL AND/OR PROGRAM SUPPORT -6401 LYONS ROAD COCONUT CREEK, EL DONOR ADVISED

(g) Description of

(h) Purpose of grant

FUNDS

_33073					FUNDS
FRACTURED ATLAS PRODUCTIONS INC 248 WEST 35TH ST 10TH FLOOR NEW YORK, NY 10001	11-3451703	501 (C )(3)	6,925		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

FRIENDS CENTRAL SCHOOL 23-1352636 501 (C)(3) 7,695

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

**(b)** EIN

GENERAL AND/OR 1101 CITY AVENUE PROGRAM SUPPORT -DONOR ADVISED

WYNNEWOOD, PA 19096

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) FRIENDS OF MCGILL 23-7054819 501 (C)(3) 70,000 IGENERAL AND/OR UNIVERSITY PROGRAM SUPPORT -

501 (C)(3)

FRIENDS OF THE BRISKER

NEW YORK, NY 10116

YESHIVA INC

PO BOX 278

23-7181650

PO BOX 28137 NEW YORK, NY 100878137					DONOR ADVISED FUNDS
FRIENDS OF THE ARAVA INSTITUTE 896 BEACON STREET BOSTON,MA 02215	11-3485736	501 (C)(3)	10,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

5,500

IGENERAL AND/OR

PROGRAM SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) FRIENDS OF THE ISRAEL 13-3156445 501 (C)(3) 3,375 GENERAL AND/OR DEFENSE FORCES (IDF) PROGRAM SUPPORT 1430 BROADWAY SUITE 1301 NEW YORK, NY 10018 RALAND/OR RAM SUPPORT -ORADVISED

FUNDS

FRIENDS OF THE ISRAEL DEFENSE FORCES (IDF) 1430 BROADWAY SUITE 1301 NEW YORK, NY 10018	13-3156445	501 (C)(3)	4,900		GENER PROGR DONOI FUNDS
FRIENDS OF YAD	76-0734439	501 (C)(3)	25,000		GENER

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

PO BOX 494

ENGLEWOOD, NJ 07631

RALAND/OR LAKASHISHLIFFLINE FOR PROGRAM SUPPORT -THE OLD DONOR ADVISED

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization if applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 501 (C)(3) 11,000 GARDEN RAISED BOUNTY-91-1594312 IGENERAL AND/OR PROGRAM SUPPORT -GRUB 2016 FILIOTT AVENUE NW DONOR ADVISED FUNDS

GENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED

IGENERAL AND/OR

PROGRAM SUPPORT

FUNDS

24,260

75,082

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

501 (C)(3)

501 (C)(3)

OLYMPIA,WA 98502
GERMANTOWN JEWISH
CENTRE
400 WEST ELLET STREE

GERSHMAN Y

PHILADELPHIA, PA 19119

401 SOUTH BROAD STREET

PHILADELPHIA, PA 19147

23-1396831

23-1352242

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 23-1352242 501 (C)(3) 21,500 GERSHMAN Y GENERAL AND/OR 401 SOUTH BROAD STREET PROGRAM SUPPORT -PHILADELPHIA.PA 19147 DONOR ADVISED FUNDS LAND/OR M SUPPORT -ADVISED

GIVEWELL 182 HOWARD STREET 208 SAN FRANCISCO,CA 94105	20-8625442	501 (C )(3)	7,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GOLDEN SLIPPER CENTER FOR SENIORS	23-2793956	501 (C)(3)	202,560		GENERAL AND/OR PROGRAM SUPPORT

3901 CONSHOHOCKEN

PHILADELPHIA, PA 19131

AVENUE

**(b)** EIN (e) Amount of non- (f) Method of valuation (a) Name and address of (c) IRC section (d) A mount of cash (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) GRATZ COLLEGE 23-1352642 501 (C)(3) 246,600 GENERAL AND/OR 7605 OLD YORK ROAD PROGRAM SUPPORT MELROSE PARK, PA 19027 GRATZ COLLEGE 23-1352642 501 (C)(3) 41,400 GENERAL AND/OR 7605 OLD YORK ROAD PROGRAM SUPPORT -DONOR ADVISED

7605 OLD YORK ROAD
MELROSE PARK, PA 19027

GREATER PHILADELPHIA 23-7046393 501 (C)(3) 35,058

GREATER PHILADELPHIA 23-7046393 FOI (C)(3) 35,058

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

SUITE 700

PHILADELPHIA, PA 19107

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) HADASSAH OF GREATER 13-6227614 501 (C)(3) 360 GENERAL AND/OR PHILADELPHIA PROGRAM SUPPORT 1518 WALNUT STREET SUITE 555 PHILADELPHIA, PA 19102 HADASSAH OF GREATER 13-6227614 10.166 501 (C)(3) IGENERAL AND/OR PHILADELPHIA PROGRAM SUPPORT -

1518 WALNUT STREET DONOR ADVISED SUITE 555 FUNDS PHILADELPHIA, PA 19102

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

NEW YORK, NY 10019

HADASSAH THE WOMEN'S 13-1656651 501 (C)(3) 35,360 GENERAL AND/OR ZIONIST ORGANIZATION PROGRAM SUPPORT -OF AMERICA INC DONOR ADVISED 50 WEST 58TH STREET FUNDS

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) HAR ZION TEMPLE 23-1365242 501 (C)(3) 29,496 GENERAL AND/OR 1500 HAGYS FORD ROAD PROGRAM SUPPORT -PENN VALLEY, PA DONOR ADVISED 190721195 FUNDS HIAS AND COUNCIL 23-1405597 501 (C)(3) 48,975 GENERAL AND/OR

2100 ARCH STREET 3RD

PHILADELPHIA, PA 19103

FLOOR

MIGRATION SERVICE OF PHILADELPHIA INC 2100 ARCH STREET 3RD FLOOR PHILADELPHIA,PA 19103					PROGRAM SUPPORT
HIAS AND COUNCIL MIGRATION SERVICE OF PHILADELPHIA INC	23-1405597	501 (C)(3)	3,500		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

FUNDS

(a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 618,936 HILLEL OF GREATER 23-1365179 501 (C)(3) GENERAL AND/OR PHILADELPHIA PROGRAM SUPPORT

501 (C)(3)

PHILADELPHIA, PA 19104

MARLBOROUGH, MA 01752

404 ROBIN HILL STREET

04-2111216

HILLSIDE SCHOOL

215 S 39TH STREET PHILADELPHIA,PA 19104					
HILLEL OF GREATER PHILADELPHIA 215 S 39TH STREET	23-1365179	501 (C)(3)	32,018		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

10,000

FUNDS

FUNDS

GENERAL AND/OR

DONOR ADVISED

PROGRAM SUPPORT -

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) HILLTOWN COMMUNITY 04-2161484 501 (C)(3) 10,000 GENERAL AND/OR HEALTH CENTERS INC. PROGRAM SUPPORT -58 OLD NORTH ROAD DONOR ADVISED ILLIND C WODTHINGTON MA 01000

PROGRAM SUPPORT -

DONOR ADVISED

FUNDS

_	WORTHINGTON, MA 01098					FUNDS
	HOLOCAUST AWARENESS MUSEUM AND EDUCATION CENTER 10100 JAMISON AVENUE PHILADELPHIA,PA 19116	23-1969470	501 (C )(3)	1,063		GENERAL AND/OR PROGRAM SUPPORT
	HOLOCAUST AWARENESS	23-1969470	501 (C)(3)	30,000		GENERAL AND/OR

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

MUSEUM AND EDUCATION

10100 JAMISON AVENUE

PHILADELPHIA, PA 19116

CENTER

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) HONOLULU MUSEUM OF 99-0079713 501 (C)(3) 10,000 GENERAL AND/OR ART PROGRAM SUPPORT -900 SOUTH BERETANIA DONOR ADVISED

STREET HONOLULU,HI 96814					FUND
HUB THEATRE COMPANY OF BOSTON INC 50 GREEN ST 409	46-1283093	501 (C)(3)	10,000		GENE PROG DONG

50 MONTGOMERY AVENUE BALA CYNWYD, PA 19004

HUB THEATRE COMPANY OF BOSTON INC 50 GREEN ST 409 BROOKLINE, MA 02446	46-1283093	501 (C)(3)	10,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
IS KOSLOFF TORAH ACADEMY HIGH SCHOOL	45-2611143	501 (C)(3)	54,032		GENERAL AND/OR PROGRAM SUPPORT

OF BOSTON INC 50 GREEN ST 409 BROOKLINE,MA 02446					PROGRAM SUP DONOR ADVIS FUNDS
IS KOSLOFF TORAH ACADEMY HIGH SCHOOL FOR GIRLS	45-2611143	501 (C)(3)	54,032		GENERAL AND PROGRAM SUP

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) INTERFAITH CENTER OF 05-0597080 501 (C)(3) 5,500 GENERAL AND/OR GREATER PHILADELPHIA PROGRAM SUPPORT -100 WOXFORD ST SUITE E-DONOR ADVISED 1300 FUNDS PHILADELPHIA, PA 19122 ALAND/OR AM SUPPORT

INTERFAITHFAMILY COM	04-3577816	501 (C)(3)	35,925		GENERA
INC 90 OAK STREET 4TH FLOOR					PROGRA
NEWTON,MA 02464					
					I

INTERFAITHEAMILY COM 04-3577816 501 (C)(3) 5,000 GENERAL AND/OR INC PROGRAM SUPPORT -

90 OAK STREET 4TH FLOOR

DONOR ADVISED NEWTON, MA 02464 FUNDS

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) INTERNATIONAL 95-3911227 501 (C)(3) 18,500 GENERAL AND/OR DOCUMENTARY PROGRAM SUPPORT -ASSOCIATION DONOR ADVISED 3470 WILSHIRE BLVD FUNDS SUITE 980 LOS ANGELES, CA 90010 ISRAFI GUIDE DOG 23-2519029 501 (C)(3) 7,450 GENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED FUNDS

CENTER FOR THE BLIND 968 EASTON RD STE H WARRINGTON, PA 18976 JACK M BARRACK HEBREW 23-1352614 501 (C)(3) 551,251 GENERAL AND/OR ACADEMY PROGRAM SUPPORT 272 SOUTH BRYN MAWR

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

AVENUE BRYN MAWR, PA 190102105

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) 23-1352614 501 (C)(3) 28,770 JACK M BARRACK HEBREW IGENERAL AND/OR PROGRAM SUPPORT -ACADEMY 272 SOUTH BRYN MAWR DONOR ADVISED LINDS AVENUE

(g) Description of

(h) Purpose of grant

GENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

BRYN MAWR,PA _190102105					FUNDS
JCC KAISERMAN 45 HAVERFORD ROAD WYNNEWOOD,PA 19096	27-0841715	501 (C)(3)	7,385		GENERAL AND/OR PROGRAM SUPPORT

65,220

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

(d) A mount of cash

(c) IRC section

501 (C)(3)

(a) Name and address of

JCC KAISERMAN

45 HAVERFORD ROAD

WYNNEWOOD, PA 19096

**(b)** EIN

27-0841715

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 1EWISH ADOPTION & 20-0898587 501 (C)(3) 5.600 GENERAL AND/OR FAMILY CARE OPTIONS -PROGRAM SUPPORT -1A FC O DONOR ADVISED 4200 NORTH UNIVERSITY FUNDS DRIVE SUNRISE, FL 33351 13-1624104 501 (C)(3) 20,000 GENERAL AND/OR PROGRAM SUPPORT

(g) Description of

(h) Purpose of grant

FUNDS

JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH STREET - 10TH FLOOR NEW YORK, NY 10016

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

FLOOR

NEW YORK, NY 10016

**(b)** EIN

JEWISH COUNCIL FOR 13-1624104 501 (C)(3) 1,500 GENERAL AND/OR PUBLIC AFFAIRS PROGRAM SUPPORT -116 E 27TH STREET - 10TH DONOR ADVISED

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 1EVS HUMAN SERVICES 23-1352118 501 (C)(3) 574.268 GENERAL AND/OR 1845 WALNUT STREET 7TH PROGRAM SUPPORT FLOOR PHILADELPHIA, PA 191034707 JEVS HUMAN SERVICES 23-1352118 501 (C)(3) 26,500 GENERAL AND/OR 1845 WALNUT STREET 7TH PROGRAM SUPPORT -FLOOR DONORADVISED PHILADELPHIA, PA FUNDS 191034707

JEWISH FAMILY AND 23-1352026 501 (C)(3) 1,473,649 GENERAL AND/OR CHILDREN'S SERVICE OF PROGRAM SUPPORT

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

GREATER PHILADELPHIA 2100 ARCH STREET 5TH FLOOR

PHILADELPHIA, PA 19103

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) JEWISH FAMILY AND 23-1352026 501 (C)(3) 28,700 GENERAL AND/OR CHILDREN'S SERVICE OF PROGRAM SUPPORT -GREATER PHILADELPHIA DONOR ADVISED

2100 ARCH STREET 5TH FLOOR PHILADELPHIA,PA 19103					FUNDS
JEWISH FARM SCHOOL 5020 CEDAR AVENUE PHILADELPHIA,PA 19143	45-4100890	501 (C)(3)	50,000		GENERAL AND/OR PROGRAM SUPPORT
1EWISH FEDERATION OF	59-0948696	501 (C.) (3)	44.250		GENERAL AND/OR

PALM BEACH COUNTY PROGRAM SUPPORT -4601 COMMUNITY DRIVE DONOR ADVISED

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

WEST PALM BEACH, FL FUNDS 334172760

(a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) JEWISH FEDERATION OF 59-1945109 501 (C)(3) 40,000 GENERAL AND/OR SOUTH PALM BEACH PROGRAM SUPPORT -COUNTY INC DONOR ADVISED 9901 DONNA KLEIN BLVD FUNDS BOCA RATON, FL 33428 JEWISH FEDERATION OF 21-0634489 501 (C)(3) 7.200 GENERAL AND/OR SOUTHERN NEW JERSEY PROGRAM SUPPORT -1301 SPRINGDALE ROAD DONOR ADVISED SUITE 200

FUNDS

FUNDS CHERRY HILL, NJ

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

ALLENTOWN, PA 18104

080032761 JEWISH FEDERATION OF 23-6396949 501 (C)(3) 11,000

THE LEHIGH VALLEY

GENERAL AND/OR PROGRAM SUPPORT -702 N 22ND ST DONOR ADVISED

(a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 23-2473518 501 (C)(3) 796,729 JEWISH LEARNING IGENERAL AND/OR VENTURE PROGRAM SUPPORT 7607 OLD YORK ROAD

5,100

GENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED

GENERAL AND/OR

PROGRAM SUPPORT

FUNDS

MELROSE PARK, PA 19027					
JEWISH LEARNING VENTURE 7607 OLD YORK ROAD	23-2473518	501 (C)(3)	11,250		

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

501 (C)(3)

1EWISH NATIONAL FUND

42 EAST 69TH STREET

NEW YORK, NY 10021

13-1659627

MELROSE PARK, PA 19027

(a) Name and address of (b) EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) JEWISH NATIONAL FUND 501 (C)(3) 30,204 13-1659627 IGENERAL AND/OR

PROGRAM SUPPORT

NEW YORK, NY 10021					PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH ORTHODOX FEMINIST ALLIANCE INC 520 8TH AVE 4TH FLOOR	52-2106560	501 (C)(3)	20,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

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

200 MONUMENT ROAD

BALA CYNWYD, PA 19004

SUITE 8

NEW YORK, NY 10018 FUNDS 501 (C)(3) JEWISH RELIEF AGENCY 26-2578017 161,954 GENERAL AND/OR

(d) A mount of cash (e) A mount of non- (f) Method of valuation organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) JEWISH RELIEF AGENCY 26-2578017 501 (C)(3) 60,200 IGENERAL AND/OR 200 MONUMENT ROAD PROGRAM SUPPORT -SUITE 8 DONOR ADVISED BALA CYNWYD, PA 19004 FUNDS JEWISH SOCIAL POLICY 20-0460097 501 (C)(3) 7,750 GENERAL AND/OR PROGRAM SUPPORT -

(a) Description of

(h) Purpose of grant

IGENERAL AND/OR

PROGRAM SUPPORT

ACTION NETWORK (JSPAN) 1735 MARKET STREET DONOR ADVISED SUITE A-417 FUNDS PHILADELPHIA, PA 19103

5,100

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

(c) IRC section

501 (C)(3)

1EWISH THEOLOGICAL SEMINARY

3080 BROADWAY NEW YORK, NY 10027

(a) Name and address of

(b) EIN

13-0887640

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) JEWISH THEOLOGICAL 13-0887640 501 (C)(3) 1,280 GENERAL AND/OR SEMINARY PROGRAM SUPPORT -3080 BROADWAY DONOR ADVISED FUNDS NEW YORK, NY 10027 JUDITH CREED HOMES FOR 23-2493728 501 (C)(3) 47,500 GENERAL AND/OR ADULT INDEPENDENCE PROGRAM SUPPORT FEDERATION HALL 274 S BRYN MAWR

AVENUE BRYN MAWR, PA 19010 JUDITH CREED HOMES FOR 23-2493728 501 (C)(3) 10,350 ADULT INDEPENDENCE

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

BRYN MAWR, PA 19010

GENERAL AND/OR PROGRAM SUPPORT -FEDERATION HALL 274 S DONOR ADVISED BRYN MAWR FUNDS AVENUE

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) JUPITER MEDICAL CENTER 65-0132406 501 (C)(3) 13,000 GENERAL AND/OR FOUNDATION INC PROGRAM SUPPORT -1210 SOUTH OLD DIXIE DONOR ADVISED HIGHWAY FUNDS THRITED EL 224E0 RALAND/OR

JUPITER, FL 33458					
KENESETH ISRAEL REFORM CONGREGATION 8339 OLD YORK ROAD ELKINS PARK,PA 19027	23-1365269	501 (C)(3)	14,672		GENERA PROGRA DONOR FUNDS

WEST CHESTER, PA 19380

RAM SUPPORT -KESHER ISRAEL 23-1948656 501 (C)(3) 6,344

RADVISED CONGREGATION

GENERAL AND/OR PROGRAM SUPPORT 1000 POTTSTOWN PIKE

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (a) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 06-1229222 501 (C)(3) 50,000 KING & LOW-HEYWOOD GENERAL AND/OR PROGRAM SUPPORT -THOMAS SCHOOLS INC. 1450 NEWFIELD AVENUE DONOR ADVISED LUNDO AND/OR M SUPPORT

STAMFORD, CT 06905					FUNDS
KLEINLIFE	27-0840848	501 (C)(3)	1,102,046		GENERAL A
10100 JAMISON AVENUE					PROGRAM
PHILADELPHIA,PA 19116					1

10,220

GENERAL AND/OR

FUNDS

PROGRAM SUPPORT -DONOR ADVISED

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

501 (C)(3)

KIFINITEE 27-0840848

10100 JAMISON AVENUE

PHILADELPHIA, PA 19116

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) KOHELET YESHIVA HIGH 23-2915026 501 (C)(3) 72,938 GENERAL AND/OR SCHOOL PROGRAM SUPPORT 223 NORTH HIGHLAND AVENUE MERION STATION, PA 19066 23-2915026 501 (C)(3) 4,420 GENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED

(g) Description of

(h) Purpose of grant

KOHELET YESHIVA HIGH
SCHOOL
223 NORTH HIGHLAND
AVENUE
MERION STATION, PA
19066

SO1 (C)(3)
4,420

GENER.
PROGR
DONOR
FUNDS

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

WYNNEWOOD, PA 19096

**(b)** EIN

MERION STATION, PA
19066

LANKENAU MEDICAL
CENTER FOUNDATION
100 EAST LANCASTER
AVENUE

AVENUE

MERION STATION, PA
19066

SEMERAL AND/OR
PROGRAM SUPPORT DONOR ADVISED
FUNDS

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) 24-0795445 501 (C)(3) 10,000 GENERAL AND/OR LEHIGH UNIVERSITY PROGRAM SUPPORT -27 MEMORIAL DRIVE WEST BETHLEHEM.PA 18015 DONOR ADVISED FUNDS ND/OR SUPPORT -

(g) Description of

(h) Purpose of grant

FUNDS

LIVING BEYOND BREAST	23-2734689	501 (C)(3)	10,700		GENERALANI
CANCER					PROGRAM SU
40 MONUMENT ROAD					DONOR ADVI:
SUITE 104					FUNDS
BALA CYNWYD, PA 19004					

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

BALA CYNWYD, PA 19004

**(b)** EIN

/ISED LOWER MERION 23-2615920 501 (C)(3) 43,561 GENERAL AND/OR SYNAGOGUE PROGRAM SUPPORT -PO BOX 2528 DONOR ADVISED

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) LYMPHOMA RESEARCH 95-4335088 501 (C)(3) 20,350 GENERAL AND/OR FOUNDATION PROGRAM SUPPORT -115 BROADWAY SUITE DONOR ADVISED 1301 FUNDS NEW YORK, NY 10006 MADLYN AND LEONARD 23-2083077 501 (C)(3) 489.915 GENERAL AND/OR ABRAMSON CENTER FOR PROGRAM SUPPORT JEWISH LIFE 1425 HORSHAM ROAD

NORTH WALES, PA 194541320 MADLYN AND LEONARD 23-2083077 501 (C)(3) 73,385 ABRAMSON CENTER FOR

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

GENERAL AND/OR PROGRAM SUPPORT -JEWISH LIFE DONOR ADVISED 1425 HORSHAM ROAD FUNDS

NORTH WALES, PA

194541320

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) MAIN LINE REFORM TEMPLE 501 (C)(3) 9,430 23-1494772 IGENERAL AND/OR PROGRAM SUPPORT -BETH ELOHIM

(g) Description of

(h) Purpose of grant

FUNDS

410 MONTGOMERY AVENUE WYNNEWOOD, PA 19096					DONOR ADVISED FUNDS
MELROSE B'NAI ISRAEL EMANU-EL 8339 OLD YORK ROAD	23-2184737	501 (C)(3)	5,100		GENERAL AND/OR PROGRAM SUPPORT

ELKINS PARK, PA 19027

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

WYNNEWOOD, PA 19096

**(b)** EIN

MIKVEH AT TEMPLE BETH 04-3683148 501 (C)(3) 66,700

IGENERAL AND/OR HILLEL BETH EL PROGRAM SUPPORT -1001 REMINGTON ROAD DONOR ADVISED

(e) A mount of non- (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 20-8448707 501 (C)(3) 8,250 GENERAL AND/OR MINDING YOUR MIND 124 SIBLEY AVENUE PROGRAM SUPPORT -ARDMORE, PA 19003 DONOR ADVISED AND/OR

FUNDS

GENERAL AND/OR

PROGRAM SUPPORT

					FUNDS
MISHKAN SHALOM 4101 FREELAND AVENUE PHILADELPHIA,PA 19128	23-2518433	501 (C)(3)	14,500		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

25,000

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

501 (C)(3)

26-2599786

MOISHE HOUSE

441 SAXONY ROAD

ENCINITAS, CA 92024

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) MOVING TRADITIONS 34-2015014 501 (C)(3) 69,000 GENERAL AND/OR 261 OLD YORK ROAD SUITE PROGRAM SUPPORT 734 JENKINTOWN, PA 19046 MOVING TRADITIONS 34-2015014 501 (C)(3) 5,000 GENERAL AND/OR PROGRAM SUPPORT -261 OLD YORK ROAD SUITE

734 JENKINTOWN, PA 19046 NANTUCKET 04-2373794

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

NANTUCKET, MA 02554

DONOR ADVISED FUNDS 501 (C)(3) 200,000 CONSERVATION

FOUNDATION INC.

GENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED 118 CLIFF ROAD FUNDS

(a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) NATIONAL COUNCIL OF 88-0348899 501 (C)(3) 6,200 GENERAL AND/OR YOUNG ISRAEL PROGRAM SUPPORT -9590 W SAHARA AVENUE DONOR ADVISED LAS VEGAS, NV 89117 FUNDS NATIONAL LIBERTY 23-2788633 501 (C)(3) 146,200 GENERAL AND/OR MUSEUM PROGRAM SUPPORT -321 CHESTNUT STREET DONOR ADVISED

321 CHESTNUT STREET
PHILADELPHIA, PA 19106

NATIONAL MULTIPLE
SCLEROSIS SOCIETY
GREATER DELAWARE
VALLEY CHAPTER
30 SOUTH 17TH STREET

DONOR ADVISED
FUNDS

DONOR ADVISED
FUNDS

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

SUITE 800

PHILADELPHIA, PA 19103

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) NATIONAL MUSEUM OF 23-7379280 501 (C)(3) 418 GENERAL AND/OR AMERICAN JEWISH PROGRAM SUPPORT HISTORY 101 SOUTH INDEPENDENCE MALL FAST PHILADELPHIA, PA 191062517 RALAND/OR RAM SUPPORT -

(g) Description of

(h) Purpose of grant

191002317					
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 101 SOUTH INDEPENDENCE MALL EAST	23-7379280	501 (C)(3)	7,650		GENERAL AND/OR PROGRAM SUPPOR DONOR ADVISED FUNDS
PHILA DELPHIA, PA					

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

**(b)** EIN

191062517

13-5562308 501 (C)(3) 9,864

NEW YORK UNIVERSITY

GENERAL AND/OR 25 WEST 4TH STREET 4TH PROGRAM SUPPORT -FLOOR

DONOR ADVISED NEW YORK, NY 10012 FUNDS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 31-1145986 501 (C)(3) 66,000 OHIO STATE UNIVERSITY IGENERAL AND/OR DROCHAM CHINDONT

501 (C)(3)

23-2520118

ORHADASH

19034

190 CAMP HILL ROAD

FORT WASHINGTON, PA

1480 WEST LANE AVENUE COLUMBUS,OH 43221					DONOR ADVISED FUNDS
OPERA PHILADELPHIA 1420 LOCUST STREET SUITE 210 PHILADELPHIA,PA 19102	23-1504706	501 (C)(3)	10,500		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

11,470

IGENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) OROT 20-0803538 501 (C)(3) 54,278 GENERAL AND/OR DDOCDAM CHDDODT 7 C O 1 O 1 D 1/ O D 1/ D O 1 D

MELROSE PARK, PA 19027					PROGRAM SUPPORT
OROT 7601 OLD YORK ROAD MELROSE PARK,PA 19027	20-0803538	501 (C)(3)	2,500		GENERAL AND/OR PROGRAM SUPPORT DONOR ADVISED

FLOOR

NEW YORK, NY 10038

7601 OLD YORK ROAD MELROSE PARK,PA 19027	20-0803538	501 (C ) (3)	2,500		PRO	NERAL AND/OR DGRAM SUPPORT - NOR ADVISED NDS
ORT AMERICA 75 MAIDEN LANE 10TH	13-5562424	501 (C)(3)	14,810		l l	NERAL AND/OR DGRAM SUPPORT -

DONOR ADVISED

FUNDS

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (g) Description of (c) IRC section (d) A mount of cash (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 13-1860028 501 (C)(3) 67,000 PARK AVENUE SYNAGOGUE IGENERAL AND/OR PROGRAM SUPPORT -50 EAST 87TH STREET NEW YORK, NY 10128 DONOR ADVISED FUNDS 10000 04 4000004 E 0 4 (C ) (2) IGENERAL AND/OR DADIZINGON COUNCIL AM SUPPORT -ADVISED

PARKINSON COUNCIL 111 PRESIDENTIAL BOULEVARD STE 250 BALA CYNWYD, PA 19004	91-1803234	501 (C ) (3)	10,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PASSOVER LEAGUE OF PHILADELPHIA	23-6267034	501 (C)(3)	17,527		GENERAL AND/OR PROGRAM SUPPORT

PHILADELPHIA 215 N PRESIDENTIAL BLVD

BALA CYNWYD, PA 19004

1ST FLOOR

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) PASSOVER LEAGUE OF 23-6267034 501 (C)(3) 250 GENERAL AND/OR PHILADELPHIA PROGRAM SUPPORT -215 N PRESIDENTIAL BLVD DONOR ADVISED 1ST FLOOR FUNDS BALA CYNWYD, PA 19004 ALAND/OR AM SUPPORT -RADVISED

PEF ISRAEL ENDOWMENT FUND INC 317 MADISON AVENUE SUITE 607	13-6104086	501 (C )(3)	6,000		GENERAL AND/OR PROGRAM SUPPORT DONOR ADVISED FUNDS
NEW YORK, NY 10017					FUNDS
PENN STATE HILLEL	25-6078799	501 (C)(3)	42,300		GENERAL AND/OR

PENN STATE HILLEL 25-6078799 501 (C)(3) 42,300 117 PASOUERILLA PROGRAM SUPPORT SPIRITUAL CENTER

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

UNIVERSITY PARK, PA

16802

**(b)** EIN (e) A mount of non- (f) Method of valuation (h) Purpose of grant (a) Name and address of (c) IRC section (d) A mount of cash (a) Description of organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 90,000 PENNSYLVANIA JEWISH 23-2210499 501 (C)(4) GENERAL AND/OR COALITION PROGRAM SUPPORT 800 N THIRD STREET SUITE

403 HARRISBURG,PA 17102					
PHILABUNDANCE 3616 S GALLOWAY STREET	23-2290505	501 (C )(3)	689		GENERA PROGRA

RALAND/OR RAM SUPPORT PHILADELPHIA, PA 19148

PHILABUNDANCE 23-2290505 501 (C)(3) 83,500

GENERAL AND/OR

3616 S GALLOWAY STREET PROGRAM SUPPORT -PHILADELPHIA, PA 19148 DONOR ADVISED FUNDS

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) PHILADELPHIA BAR 23-1660797 501 (C)(3) 6,000 GENERAL AND/OR FOUNDATION PROGRAM SUPPORT -1101 MARKET STREET DONOR ADVISED 11TH FLOOR FUNDS PHILADELPHIA, PA 191072911 ND/OR SUPPORT -VISED

PHILADELPHIA CITY	27-1522343	501 (C)(3)	100,100		GENERALAN
ROWING INC					PROGRAM SU
450 PLYMOUTH ROAD					DONORADVI
SUITE 305					FUNDS
PLYMOUTH MEETING, PA					
19462					

58

GENERAL AND/OR

PROGRAM SUPPORT

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

501 (C)(3)

23-1365388

PHILADELPHIA MUSEUM OF

PHILADELPHIA, PA 19101

PO BOX 7646

ART

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 23-1365388 501 (C)(3) 28.645 GENERAL AND/OR PHILADELPHIA MUSEUM OF ART PROGRAM SUPPORT -PO BOX 7646 DONOR ADVISED PHILADELPHIA, PA 19101 FUNDS /O R PORT -

PROGRAM SUPPORT -

DONOR ADVISED

FUNDS

PHILADELPHIA ORCHESTRA ASSOCIATION ONE SOUTH BROAD STREET 14TH FLOOR PHILADELPHIA,PA 19107		501 (C )(3)	10,200		GENERAL AND/OR PROGRAM SUPPORT DONOR ADVISED FUNDS
PHOENIX COUNTRY DAY	86-0172671	501 (C)(3)	50,000		GENERAL AND/OR

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

3901 E STANFORD DR

PARADISE VLY, AZ 85253

SCHOOL

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) PIRC PENNSYLVANIA 23-2851213 501 (C)(3) 6,000 GENERAL AND/OR IMMIGRATION RESOURCE PROGRAM SUPPORT -CENTER DONOR ADVISED PO BOX 20339 FUNDS YORK, PA 17402 POLITZ HEBREW ACADEMY 22-2436383 501 (C)(3) 229.762 GENERAL AND/OR PROGRAM SUPPORT

PROGRAM SUPPORT
AVENUE
PHILADELPHIA, PA 19115

RAYMOND AND RUTH
PERELMAN JEWISH DAY
SCHOOL
49 HAVERFORD ROAD

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

WYNNEWOOD, PA 190963628

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) RAYMOND AND RUTH 23-1496890 501 (C)(3) 56,300 GENERAL AND/OR PERFLMAN JEWISH DAY PROGRAM SUPPORT -SCHOOL DONOR ADVISED

(g) Description of

(h) Purpose of grant

FUNDS

49 HAVERFORD ROAD WYNNEWOOD, PA _ 190963628					FUNDS
RECONSTRUCTIONIST RABBINICAL COLLEGE 1299 CHURCH ROAD	23-1710675	501 (C )(3)	56,451		GENERAL AND/OR PROGRAM SUPPORT

WYNCOTE, PA 190951898 1,560 RECONSTRUCTIONIST 23-1710675 501 (C)(3)

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

WYNCOTE, PA 190951898

**(b)** EIN

GENERAL AND/OR RABBINICAL COLLEGE PROGRAM SUPPORT -1299 CHURCH ROAD DONOR ADVISED

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) RESOURCES FOR HUMAN 23-1727133 501 (C)(3) 12,500 GENERAL AND/OR DEVELOPMENT PROGRAM SUPPORT -4700 WISSAHICKON AVE DONOR ADVISED SUITE 126 FUNDS DUTIADEIDUTA DA 10144

(g) Description of

(h) Purpose of grant

FUNDS

PHILADELPHIA, PA 19144					
RONALD MCDONALD HOUSE OF NEW YORK INC 405 EAST 73RD STREET NEW YORK,NY 10021	13-2933654	501 (C)(3)	5,100		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ROSENBACH MUSEUM AND LIBRARY 2008-2010 DELANCEY	23-1425055	501 (C)(3)	12,000		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

PHILADELPHIA, PA 19103

PLACE

**(b)** EIN

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) SMITH MEMORIAL 23-1353547 501 (C)(3) 5.600 GENERAL AND/OR PLAYGROUND & PROGRAM SUPPORT -PLAYHOUSE DONOR ADVISED

(g) Description of

(h) Purpose of grant

PROGRAM SUPPORT -

DONOR ADVISED

FUNDS

3500 RESERVOIR DRIVE PHILADELPHIA,PA _191211095					FUNDS
SOLOMON R GUGGENHEIM FOUNDATION 1071 FIFTH AVENUE	13-5562233	501 (C)(3)	14,935		GENERAL AND/OR PROGRAM SUPPORT

NEW YORK, NY 10128 FUNDS SOUTHERN POVERTY LAW 63-0598743 501 (C)(3) 11,250 GENERAL AND/OR

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

400 WASHINGTON AVENUE

MONTGOMERY, AL 36104

CENTER

**(b)** EIN

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) STEPHEN S WISE TEMPLE 95-6087552 501 (C)(3) 17,000 GENERAL AND/OR 15500 STEPHEN S WISE PROGRAM SUPPORT -DRIVE DONOR ADVISED ND/OR

(g) Description of

(h) Purpose of grant

	FUNDS
250 NORTH HIGHLAND	GENERAL AND PROGRAM SUI DONOR ADVIS FUNDS

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

**(b)** EIN

SUPPORT -/ISED

MERION STATION, PA 19066					FUNDS
TEMPLE BETH ZION BETH	23-1501180	501 (C)(3)	8,754		GENERAL AND/O

)/OR PPORT -

300 SOUTH 18TH STREET DONOR ADVISED PHILADELPHIA, PA 19103 FUNDS

**(b)** EIN (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) TEMPLE EMANU-EL OF 59-1027143 501 (C)(3) 8.000 IGENERAL AND/OR PROGRAM SUPPORT -PALM BEACH

501 (C)(3)

(d) A mount of cash

(a) Name and address of

THE CHEVRA INC.

FLOOR

2002 LUDIOW STREET 3RD

PHILADELPHIA, PA 19103

20-1261430

190 NORTH COUNTY ROAD PALM BEACH, FL 33480					DONOR ADVISED FUNDS
THE CHEVRA INC 2002 LUDLOW STREET 3RD FLOOR PHILADELPHIA PA 19103	20-1261430	501 (C )(3)	80,125		GENERAL AND/OR PROGRAM SUPPORT

IGENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

17,100

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) THE CHILDREN'S HOSPITAL 23-2237932 501 (C)(3) 11,900 GENERAL AND/OR OFPHILADELPHIA PROGRAM SUPPORT -FOUNDATION DONOR ADVISED 1352 PO BOX 8500 FUNDS PHILADELPHIA, PA 191781352 THE EPISCOPAL ACADEMY 23-1370500 501 (C)(3) 32,500 GENERAL AND/OR 1785 BISHOP WHITE DRIVE PROGRAM SUPPORT -NEWTOWN SQUARE, PA DONOR ADVISED

190739902 FUNDS THE FRIENDSHIP CIRCLE 27-1039799 501 (C)(3) 49,625 GENERAL AND/OR PROGRAM SUPPORT

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

PHILADELPHIA REGION INC 754 SOUTH 9TH STREET 3RD FL

PHILADELPHIA, PA 19147

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) THE FRIENDSHIP CIRCLE 27-1039799 501 (C)(3) 13,500 GENERAL AND/OR PHILADELPHIA REGION PROGRAM SUPPORT -INC DONOR ADVISED FILMIDS 754 SOUTH OTH STREET

3RD FL PHILADELPHIA,PA 19147						TONDS
THE JEWISH FEDERATIONS OF NORTH AMERICA 25 BROADWAY SUITE 1700	13-1624240	501 (C)(3)	3,533,913		1	GENERAL AND/OR PROGRAM SUPPORT

NEW YORK, NY 100041010 THE JEWISH FEDERATIONS 13-1624240 501 (C)(3) 12,300

OF NORTH AMERICA

(d) A mount of cash

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

(c) IRC section

(a) Name and address of

NEW YORK, NY 100041010

**(b)** EIN

(g) Description of

(h) Purpose of grant

FUNDS

(e) A mount of non- (f) Method of valuation

GENERAL AND/OR PROGRAM SUPPORT -25 BROADWAY SUITE 1700 DONOR ADVISED

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 91-1154904 501 (C)(3) 10,000 THE KLINE GALLAND IGENERAL AND/OR CENTER PROGRAM SUPPORT -7500 SEWARD AVENUE S DONOR ADVISED SEATTLE, WA 98118 FUNDS THE NATIONAL JEWISH 23-7390358 501 (C)(3) 50,100 GENERAL AND/OR CENTER FOR LEARNING PROGRAM SUPPORT -AND LEADERSHIP (CLAL) DONOR ADVISED

440 PARK AVENUE SOUTH 4TH FLOOR NEW YORK, NY 100168012

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

FUNDS THE SHIPLEY SCHOOL 23-1352677 501 (C)(3) 52,000

GENERAL AND/OR 814 YARROW STREET PROGRAM SUPPORT -

FUNDS

BRYN MAWR, PA 19010 DONOR ADVISED

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) THE TRUST FOR PUBLIC 23-7222333 501 (C)(3) 20,000 GENERAL AND/OR LAND PROGRAM SUPPORT -101 MONTGOMERY STREET DONOR ADVISED SUITE 900 FUNDS EDANICICCO CA

GENERAL AND/OR

PROGRAM SUPPORT

94104					
THE WESTMARK SCHOOL 5461 LOUISE AVENUE ENCINO,CA 91316	95-4616645	501 (C)(3)	33,100		GENERAL AND/OR PROGRAM SUPPORT DONOR ADVISED FUNDS

175,000

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

501 (C)(3)

THE WEXNER FOUNDATION

8000 WALTON PARKWAY

NEW ALBANY, OH 43054

SUITE 110

23-7320631

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) TORAH ACADEMY OF 23-1645684 501 (C)(3) 141,327 GENERAL AND/OR

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

501 (C)(3)

WYNNEWOOD, PA 19096

201 S CAMAC STREET 2ND

PHILADELPHIA, PA 19107

27-1610125

TRIBE 12

FLOOR

GREATER PHILADELPHIA 742 ARGYLE ROAD WYNNEWOOD,PA 19096					PROGRAM SUPPORT
TORAH ACADEMY OF GREATER PHILADELPHIA 742 ARGYLE ROAD	23-1645684	501 (C)(3)	4,670		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

224,352

FUNDS

GENERAL AND/OR

PROGRAM SUPPORT

organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) TRIBE 12 27-1610125 501 (C)(3) 1,000 GENERAL AND/OR 201 S CAMAC STREET 2ND PROGRAM SUPPORT -FLOOR DONOR ADVISED FUNDS PHILADELPHIA, PA 19107 TRUSTEES OF THE 23-1352685 501 (C)(3) 790,220 GENERAL AND/OR UNIVERSITY OF PROGRAM SUPPORT -PENNSYLVANIA DONOR ADVISED

(e) Amount of non- (f) Method of valuation

(g) Description of

(h) Purpose of grant

FUNDS

3451 WALNUT STREET -FUNDS CENTRAL GIFTS OFFICE

(d) A mount of cash

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

(c) IRC section

PHILADELPHIA, PA 19104 72-0423889 501 (C)(3) 18,000 GENERAL AND/OR PROGRAM SUPPORT -DONOR ADVISED

TULANE UNIVERSITY PO BOX 61075 NEW ORLEANS, LA

701619886

(a) Name and address of

**(b)** EIN

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) UJA FEDERATION OF NEW 51-0172429 501 (C)(3) 10,000 GENERAL AND/OR YORK PROGRAM SUPPORT -130 EAST 59TH STREET DONOR ADVISED NEW YORK, NY 10022 FUNDS

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

1709 BENJAMIN FRANKLIN

PHILADELPHIA, PA 19103

PKWY

UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM 820 SECOND AVENUE 10TH FLOOR NEW YORK,NY 100174504	13-1659707	501 (C)(3)	15,200		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
UNITED WAY OF GREATER PHILADELPHIA & SOUTHERN NEW JERSEY	23-1556045	501 (C)(3)	14,840		GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED

FUNDS

(a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (d) A mount of cash organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) UNITED WAY OF RHODE 05-0276059 501 (C)(3) 82,500 IGENERAL AND/OR PROGRAM SUPPORT -ISLAND INC

GENERAL AND/OR

DONOR ADVISED

FUNDS

PROGRAM SUPPORT -

50 VALLEY STREET PROVIDENCE, RI 02906				DONOR ADVISED FUNDS
UNIVERSITY OF THE ARTS 320 SOUTH BROAD STREET PHILADELPHIA,PA 19102	501 (C)(3)	5,900		GENERAL AND/OR PROGRAM SUPPORT DONOR ADVISED FUNDS

45,000

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

501 (C)(3)

23-2090256

WESLEY ENHANCED LIVING

101 EAST COUNTY LINE

HATBORO, PA 19040

MAIN LINE

**ROAD SUITE 200** 

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 02-0545031 501 (C)(3) 10,500 WHITEMARSH GENERAL AND/OR PROGRAM SUPPORT -FOUNDATION DO BOVERO DONOR ADVICED

LAFAYETTE HILL,PA 19444					FUNDS
WILLS EYE HOSPITAL 840 WALNUT STREET SUITE 1520 PHILADELPHIA,PA 19107	23-6000204	501 (C)(3)	5,100		GENERAL AND/OR PROGRAM SUPPORT

WOMEN'S OPPORTUNITIES 23-2741508 501 (C)(3) 36,000

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

2010 CHESTNUT STREET PHILADELPHIA, PA 19103

GENERAL AND/OR RESOURCE CENTER PROGRAM SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 501 (C)(3) 9.000 YESHIVAT CHOVEVEL 13-4159739 IGENERAL AND/OR PROGRAM SUPPORT -TORAH RABBINICAL ADVISED

FUNDS

VECHIVAT MAHADAT	01 0054143	E01 (C ) (3)	60,000		CENEDAL
SCHOOL LTD 3700 HENRY HUDSON PKWY 2ND FLOOR RIVERDALE,NY 10463					DONOR A

YESHIVAI MAHAKAI 01-0954142 501 (C)(3) 60,000

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

BRONX, NY 10463

IGENERAL AND/OR PROGRAM SUPPORT -3700 HENRY HUDSON PARKWAY DONOR ADVISED

Schedule J

## **Compensation Information**

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

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

► Attach to Form 990.

2015

OMB No 1545-0047

DLN: 93493195011057

Open to Public Inspection

Department of the Treasury Internal Revenue Servi

PHILADELPHIA

(Form 990)

▶ Information about Schedule J (Form 990) and its instructions is at <a href="www.irs.qov/form990">www.irs.qov/form990</a>.

Internal Revenue Service

Name of the organization
JEWISH FEDERATION OF GREATER

Employer identification number

23-1500085

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			1
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	 		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee			
	✓ Independent compensation consultant ✓ Compensation survey or study			1
	Form 990 of other organizations  A pproval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form $990$ , Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		No
	If "Yes," on line 5a or 5b, describe in Part III			
5	For persons listed on Form 990, Part VII, Section A, line $1a$ , $did$ the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	<b>6</b> a		Νo
b	Any related organization?	6b		No
	If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III			l
_		8		No
y	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

For each individual whose compensation must be reported on Schedule 1, report compensation from the organization on row (1) and from related organizations, described in the

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

Instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII. Section A line 12, applicable column (D) and (E) amounts for that individual.

Note: The sum of columns (B)(1)-(iii) for each listed individual must equal the total amount of Form 990. Part VII. Section A line 12, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (I) compensation	(iı) Bonus & ıncentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 NAOMI L ADLER TRUSTEE, BOARD OF	(i)	411,753	20,000	446	11,796	21,790	465,785	0
DIRECTOR, CEO	(ii)	0	0	0	0	0	0	0
2 JEROME NACHLIS CHIEF FINANCIAL & ADMIN	(i)	204,747	18,000	573	8,488	20,643	252,451	0
OFFICER	(ii)	0	0	0	0	0	0	0
3 STEVEN ROSENBERG CHIEF MARKETING OFFICER	(i)	201,321	18,000	1,402	0	732	221,455	0
	(ii)	0	0	0	0	0	0	0
4 DONNA FREYMAN DIRECTOR OF HUMAN	(i)	132,905	4,000	0	21,779	18,401	177,085	0
RESOURCES	(ii)	0	0	0	0	0	0	0
5 DUKE NAVECONTROLLER	(i)	155,446	3,000	0	7,602	7,247	173,295	0
	(ii)	0	0	0	0	0	0	0
6 ROBERT QUATTRO DIRECTOR OF INFORMATION	(i)	137,260	2,000	0	3,909	20,012	163,181	0
TECHNOLOGY	(ii)	0	0	0	0	0	0	0
<b>7</b> ROBERT SELTZER CAMPAIGN DIRECTOR	(i)	145,457	10,000	164	6,134	19,690	181,445	0
	(ii)	0	0	0	0	0	0	0
<b>8</b> RACHEL GROSS DIRECTOR PLANNED GIVING	(i)	160,256	10,000	1,148	11,651	1,328	184,383	0
& ENDOWMENT	(ii)	0	0	0	0	0	0	0
9 IRA SCHWARTZ FORMER CEO	(i)	0	0	323,580	0	0	323,580	0
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015	Page <b>3</b>						
Part III Supplemental Infor	mation						
Provide the information, explanation,	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference Explanation							
PART I, LINE 1A	JEWISH FEDERATION SHALL PAY ALL REASONABLE AND NECESSARY EXPENSES TO ALLOW THE CEO'S SPOUSE TO ACCOMPANY HER TO ONE						

Schedule J (Form 990) 2015

## Software ID: **Software Version:**

**EIN:** 23-1500085

Name: JEWISH FEDERATION OF GREATER

PHILADELPHIA

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1NAOMI L ADLER TRUSTEE, BOARD OF	(1)	411,753	20,000	446	11,796	21,790	465,785	(
DIRECTOR, CEO	(11)	0	0	0	О	-0		(
1JEROME NACHLIS CHIEF FINANCIAL & ADMIN	(1)	204,747	18,000	573	8,488	20,643	252,451	
OFFICER	(11)	0	0	0	0		-	(
2STEVEN ROSENBERG CHIEF MARKETING OFFICER	(1)	201,321	18,000	1,402	0	732	221,455	
	(11)	0	0	0	0			(
3DONNA FREYMAN DIRECTOR OF HUMAN	(1)	132,905	4,000	0	21,779	18,401	177,085	1
RESOURCES	(11)	0	0	0	0	-	-	(
4DUKE NAVECONTROLLER	(1)	155,446	3,000	0	7,602	7,247	173,295	
	(11)	0	0	0	0			(
<b>5</b> ROBERT QUATTRO DIRECTOR OF INFORMATION	(1)	137,260	2,000	0	3,909	20,012	163,181	(
TECHNOLOGY	(11)	o	0	0	0	-	-	(
6ROBERT SELTZER CAMPAIGN DIRECTOR	(1)	145,457	10,000	164	6,134	19,690	181,445	
	(11)	0	0	0	0			(
7RACHEL GROSS DIRECTOR PLANNED GIVING	(1)	160,256	10,000	1,148	11,651	1,328	184,383	(
& ENDOWMENT	(11)	0	0	0	0			(
8IRA SCHWARTZ FORMER CEO	(1)	0	0	323,580	0	0	323,580	
	(11)	0	0	0	0	- - 0	-	(

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
Schedule K

(Form 990)

Department of the Treasury

**Supplemental Information on Tax Exempt Bonds** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

▶Information about Schedule K (Form 990) and its instructions is at  $\underline{www.irs.qov/form990}$ .

OMB No 1545-0047

2015

DLN: 93493195011057

Open to Public Inspection

	nal Revenue Service														
	e of the organization 'ISH FEDERATION OF GREATE	ĒR								Emp	oloyer id	lentifica	ation nui	nber	
	LADELPHIA									23-	15000	85			
Pa	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue p	orice	(f)	Description	n of purpose	( <b>g)</b> Dei	feased	beh	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	COLORADO EDUC AND CULTURAL FACILITIES AUTHORITY	84-0896727		09-04-2012	27,10	0,000	SEE P	ART VI			Х		X		х
Pa	rt III Proceeds														
						A		I	В		С			D	
1	A mount of bonds retired					440	000,0								
2	Amount of bonds legally defe	ased													
3	Total proceeds of issue					27,100	,000								
4	Gross proceeds in reserve fu	nds													
5	Capitalized interest from pro														
6	Proceeds in refunding escrov	vs													
7	Issuance costs from proceed	ds													
8	Credit enhancement from pro	ceeds													
9	Working capital expenditures	from proceeds													
10	Capital expenditures from pro	oceeds													
11	Other spent proceeds					27,100	,000								
12	Other unspent proceeds .														
13	Year of substantial completion				20	10									
					Yes	N	0	Yes	No	Yes	ı	No	Yes	;	No
14	Were the bonds issued as pa	rt of a current refundi	ngıssue?	•	Х										
15	Were the bonds issued as pa	rt of an advance refun	ıdıng ıssue?			Х	:								
16	Has the final allocation of pro	oceeds been made?.			Х										
17	Does the organization mainta allocation of proceeds?	aın adequate books ar	nd records to supp	ort the final	х										
													Щ		
Feli	rt IIII Private Business	use				Δ	<u> </u>		<u>,                                      </u>		С	1		D	
					Yes	No	, +	Yes	No	Yes		No	Yes	<del></del>	No
1	Was the organization a partner					×					•				

Are there any lease arrangements that may result in private business use of bond-

			A		В	3		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private but of bond-financed property?	usiness use		×						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or o									
prope	counsel to review any management or service contracts relating to the finan rty?	ced								
С	Are there any research agreements that may result in private business use a financed property?	of bond-		x						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or o counsel to review any research agreements relating to the financed property									
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government .			0 %						
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government	section		0 %						
6	Total of lines 4 and 5			0 %						
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bond issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or di	sposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations so 1 141-12 and 1 145-2?	ections								
9	Has the organization established written procedures to ensure that all nonque bonds of the issue are remediated in accordance with the requirements unde Regulations sections 1 141-12 and 1 145-2?			х						
Par	t IV Arbitrage									
	<del></del>	Α			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		х							
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?		Х							
b	Exception to rebate?	Х								
С	No rebate due?		Х							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?	Χ								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X								
b	Name of provider	DEUTSCHE B	ANK							
С	Term of hedge	390 00000	00000 %							
d	Was the hedge superintegrated?		Х							
e	Was the hedge terminated?		Х							
				•						

Pai	til Arbitrage (Con	itinued)								
			Α		В		С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds inv contract (GIC)?	ested in a guaranteed investment		х						
b	Name of provider									
С	Term of GIC									
d		harbor for establishing the fair market d?								
6	Were any gross proceeds period?	s invested beyond an available temporary		х						
7	Has the organization est the requirements of sect	ablished written procedures to monitor	х							
Pa	rt V Procedures To	Undertake Corrective Action								
			A		В		С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
	that violations of federal and corrected through th	ablished written procedures to ensure tax requirements are timely identified ne voluntary closing agreement program if vailable under applicable regulations?	x							
Pa	rt VI Supplement	al Information. Provide additional inform	mation for resp	onses to qu	iestions on S	chedule K (s	see instructio	ns).		
	Return Reference		Explanation							
	EDULE K SUPPLENTAL DRMATION	PART I, LINE A, COLUMN F TO REFUND THE SCHWARTZ CAMPUS CAPITAL EXPENDITUE REDUCTION, AND CAPITAL IMPROVEMENT ISSUANCE)	RES (2008 ISSU	ANCE) AND	ISSUANCE CO	DSTS, DEBT	CED			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**Transactions with Interested Persons** 

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Treasury Internal Revenue Service

Schedule L (Form 990 or 990-EZ)

Department of the

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

OMB No 1545-0047

DLN: 93493195011057

2015

Open to Public Inspection

Name of the organization JEWISH FEDERATION OF GREATER							En	Employer identification number							
PHILADELPHIA									-150						
							(4), and 501(c					10h			
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or 1  (a) Name of disqualified person  (b) Relationship between disqualified person							c) Des	(d) Corr	ected?						
1 (-/				(-,	•	ganızatıon	p	`	•	saction	·	Yes No			
2 Enter the	amount of tax	ıncur	red by orgai	nızatıon ma	nagers or dis	qualified pers	ons during the	vear ı	under	section					
4958 .										<b>&gt;</b> \$					
<b>3</b> Enter the	amount of tax	, ıf an	y, on line 2,	above, reir	nbursed by th	ne organizatio	n			<b>&gt;</b> \$					
										•					
Part II L	oans to and	l/or	From Int	erested	Persons.			0.0	0 0		2.6	6.1			
	omplete if the ganization rep						line 38a, or Fo	orm 99	0, Par	t IV, lin	e 26, o	rifthe			
01	gamzation rep	orteu	an amount	011 1 01111 9 9	o, raic x, iiii	C 3, 0, 01 22									
(a) Name of	(b) Relation	ship	(c)	(d) Loan t	:0	(e)O riginal	(f)Balance	(g)	In	(h	)	(i)Wrıtten			
interested	with		Purpose of	or from th		principal	due			Appro		agreement?			
person	organizati	rganization loan		organization?		amount		1 '		1 '	board or				
				<b>.</b>	T =	<b>⊣</b>				commi	1				
				То	From			Yes	No	Yes	No	Yes	No		
											1				
											<del> </del>				
											1				
											1				
Total			<b>▶</b> \$								1				
	ants or Ass	cicto		fiting In	tarastad B	Parsons									
							rt IV, line 27								
(a) Name of			Relationshij			ofassistance			stance	e (e)	Purpos	e of assi	stance		
pers			rested perso		(-,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			``					
			organızat	ion											
		ı			I		1			1					

Part IV Business Transactions	s Involving Interested	d Persons.			
Complete if the organiza	ition answered "Yes" on I	Form 990, Part IV, lin	e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sha of organiz reveni	zation's
				Yes	No
(1) FIRSTRUST BANK	SEE BELOW	322,847	THE NET TRANSACTION AMOUNT IS \$322,847 CONSISTING OF THE FOLLOWING (\$268,967) - REPAYMENT OF LOANS (\$14,200,000) - PRINCIPAL PAYDOWNS OF LINE OF CREDIT \$14,930,000 - ADDITIONAL BORROWINGS FROM LINE OF CREDIT (\$138,186) - INTEREST PAID ON LINE OF CREDIT AND LOANS		No
(2)					No
Part V Supplemental Information		s on Schedule L (see ins	tructions)		
Return Reference	<u> </u>	Explanat			
SCHEDULE L, PART IV, COLUMN B RI	ELATIONSHIP BETWEEN I	NTERESTED PERSON A	ND THE ORGANIZATION A 35	%	

CONTROLLED ENTITY BY INTERESTED PERSON - DIRECTOR AND/OR FAMILY MEMBER OF DIRECTOR, AS DEFINED BY IRS (RICHARD J GREEN, JEWISH FEDERATION OFFICER)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493195011057

**SCHEDULE M** (Form 990)

Department of the

## **Noncash Contributions**

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

► Attach to Form 990.

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

OMB No 1545-0047 2015

> Open to Public Inspection

Treasury Internal Revenue Service Name of the organization **Employer identification number** JEWISH FEDERATION OF GREATER PHILADELPHIA 23-1500085 Part I Types of Property (b) (d) (a) (c) Check Number of contributions Noncash contribution Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g Art—Works of art . . . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household . . . . . Cars and other vehicles . . Х 18 16,583 PROCEEDS LESS FEES Boats and planes . . . . Intellectual property . . 9 Securities-Publicly traded . Х 197 2,259,155 FMV LESS FEES Securities—Closely held stock . Securities—Partnership, LLC, or trust interests . . . Χ 3 12,500 FMV Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . 14 Oualified conservation contribution-Other . . . Real estate—Residential . 2 673,699 FMV 16 Real estate—Commercial . . 17 Real estate—Other . . . 18 Collectibles . . . . **19** Food inventory . . 20 Drugs and medical supplies . **21** Taxidermy . . . . . 22 Historical artifacts . . . . 23 Scientific specimens . . 24 Archeological artifacts . . . **25** Other ▶ ( **26** Other ▶ ( \_\_\_\_\_) **27** Other ▶ (\_\_\_\_\_ **28** Other ▶ (\_\_\_ Number of Forms 8283 received by the organization during the tax year for contributions 29 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Νo **b** If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . . . . . . . . . . 32a Yes b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2015)

As Filed Data efile GRAPHIC print - DO NOT PROCESS **SCHEDULE 0** (Form 990 or

990-EZ)

Treasury

Service

PHILADELPHIA

Department of the

Internal Revenue

Name of the organization JEWISH FEDERATION OF GREATER 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

DLN: 93493195011057

**Employer identification number** 

23-1500085

Open to Public Inspection

Return Reference	Explanation
FORM 990,	FOR MORE THAN 115 YEARS, THE JEWISH FEDERATION OF GREATER PHILADELPHIA HAS SERVED AS THE H
PART I, LINE 1	UB OF GREATER PHILADELPHIA'S JEWISH COMMUNITY THROUGH GIVING, INCLUSION AND TRADITION THE
	JEWISH FEDERATION HAS THREE MAIN GOALS SERVING VULNERABLE POPULATIONS, SUPPORTING JEWISH
	LIFE AND LEARNING AND FACILITATING COMMUNITY ENGAGEMENT, MAKING IT THE ONE PLACE TO WHICH
	ALL COMMUNITY MEMBERS CAN TURN THROUGH A UNIQUE PARTNERSHIP OF PHILANTHROPISTS, ORGANIZA
	TIONS, VOLUNTEERS AND STAFF, THE JEWISH FEDERATION FILLS THREE KEY ROLES PHILANTHROPY, CO
	MMUNITY CONVENER AND GRANT MAKER PHILANTHROPY WE STEWARD OUR DONORS' GENEROSITY TO ADDRE
	SS JEWISH COMMUNAL PRIORITIES TODAY (THROUGH THE JEWISH COMMUNITY FUND) AND FOR THE FUTURE
	(THROUGH PLANNED GIVING VEHICLES) COMMUNITY CONVENER WE CONNECT ORGANIZATIONS AND SYNAG
	OGUES IN GREATER PHILADELPHIA THE JEWISH FEDERATION ALSO BRING TOGETHER FAMILIES AND INDI
	VIDUALS FOR SOCIAL ACTION ACTIVITIES, AFFINITY GROUPS, LEARNING AND LEADERSHIP OPPORTUNITI
	ES, ADVOCACY, EVENTS AND TRAVEL WITH A PURPOSE GRANT MAKER. THE FUNDS WE RAISE ARE GRANTE
	D TO PROGRAMS THAT MEET CRITICAL NEEDS LOCALLY, IN ISRAEL AND AROUND THE WORLD. WE EVALUAT
	E THE IMPACT OF THE GRANTS TO ENSURE THEY ARE EFFECTIVELY ADDRESSING THE JEWISH FEDERATION
	'S PRIORITIES

990 Schedule O. Supplemental Information

Return

### Reference FORM 990. AARON, BENNETT L / AARON, CAROL - FAMILY RELATIONSHIP BARRACK, LEONARD / BARRACK, LYNNE / PART VI. BARRACK, JEFFREY - FAMILY RELATIONSHIP BERMAN, BRYNA / BERMAN, SHARYN - FAMILY RELATIONSH

LY RELATIONSHIP SHAPIRO, RAYMOND / SHAPIRO, JUDIE - FAMILY RELATIONSHIP

Explanation

N. JAYNE- FAMILY RELATIONSHIP ROSENBERG, PETER / ROSENBERG, JOYCE - FAMILY RELATIONSHIP RO SS. LYN / ROSS. MICHAEL J FAMILY RELATIONSHIP SCHNEIROV. ALLAN / SCHNEIROV. MIRIAM - FAMI

/ ERLBAUM DANIEL / ERLBAUM. SCOTT - FAMILY RELATIONSHIP FISHMAN. ANNABELLE / FISHMAN. MAR K - FAMILY RELATIONSHIP GOLD. DAVID / GOLD, MORRIE - FAMILY RELATIONSHIP GOLDER, ROBERT B / GOLDER-SAFT, ELLYN - FAMILY RELATIONSHIP KRAMER, ARNOLD H / KRAMER, KAREN G - FAMILY R ELATIONSHIP LEVIN, JONATHAN / LEVIN, SHARON - FAMILY RELATIONSHIP LINCOW, BARBARA / COLE, JASON - FAMILY RELATIONSHIP LIPTON, A DELE / LIPTON, IRWIN - FAMILY RELATIONSHIP MINKOFF, J

AY B / MINKOFF, SARA - FAMILY RELATIONSHIP PERILSTEIN, COOKIE / WARGON, MARGIE/ PERILSTEI

SECTION A. IP BLASKEY, MARK / BLASKEY, PENNI- FAMILY RELATIONSHIP CONSTON, SHIRLEY / CONSTON, STUART LINE 2 - FAMILY RELATIONSHIP DISHLER, BERNARD / DISHLER, LANA - FAMILY RELATIONSHIP ERLBAUM, GARY

# 990 Schedule O, Supplemental Information Return

SSION PRIOR TO A VOTE

FORM 990, PART VI.

RELATIONSHIP BETWEEN THE JEWISH FEDERATION'S BOARD OF DIRECTORS AND BOARD OF TRUSTEES THE
JEWISH FEDERATION IS GOVERNED BY THE BOARD OF DIRECTORS. A CCORDING TO JEWISH FEDERATION'S

Explanation

SECTION A,

BY-LAWS, ARTICLE 4 01, JEWISH FEDERATION'S BOARD OF TRUSTEES HAS THE POWER TO - A PPROVE

JEWISH FEDERATION'S BUDGET - A PPROVE JEWISH FEDERATION'S ALLOCATIONS - ELECT OFFICERS AND

TRUSTEES - RESOLVE MAJOR POLICY ISSUES REFERRED BY THE BOARD OF DIRECTORS - EXPLORE AND PR

OVIDE DIRECTION FOR DEALING WITH MAJOR COMMUNITY CONCERNS - A PPROVE LONG RANGE PLANS FOR T

HE JEWISH FEDERATION - A MEND JEWISH FEDERATION'S BY-LAWS IF THE TRUSTEES DO NOT A PPROVE A

DECISION MADE BY THE DIRECTORS, THE ITEM GOES BACK TO THE DIRECTORS FOR FURTHER DISCUSSION

AND REVISION THE ITEM IS THEN BROUGHT BACK TO THE TRUSTEES FOR ANOTHER VOTE THIS PROCES

S CAN CONTINUE UNTIL THE MATTER HAS BEEN RESOLVED THE BOARD OF TRUSTEES HAS UP TO 250 MEM

BERS, INCLUDING ALL DIRECTORS, ALL PAST JEWISH FEDERATION CAMPAIGN CHAIRS, AND THE PRESIDE

NT OF EACH LOCAL BENEFICIARY AGENCY NON-VOTING HONORARY TRUSTEES MAY PARTICIPATE IN DISCU

990 Schedule O. Supplemental Information Return Explanation Reference FORM 990. EACH YEAR THE JEWISH FEDERATION HAS VARIOUS TAX FILING REQUIREMENTS. THE TAX RETURNS ARE C PART VI. OMPLETED BY A TAX ACCOUNTING FIRM USING INFORMATION AUDITED BY AN INDEPENDENT AUDITING FIR SECTION B. M. THESE CAN BE THE SAME OR SEPARATE FIRMS AS SELECTED BY THE AUDIT COMMITTEE OF JEWISH FE

SECTION B,
LINE 11

M THESE CAN BE THE SAME OR SEPARATE FIRMS AS SELECTED BY THE AUDIT COMMITTEE OF JEWISH FE
DERATION THE 990 IS PRESENTED BY THE TAX ACCOUNTING FIRM TO THE AUDIT COMMITTEE FOR REVIE
W AND APPROVAL AFTER THEIR REVIEW, THE 990 PROVIDED TO THE BOARD OF DIRECTORS VIA E-MAIL
OR MAIL FOR COMMENT AND THEN FILED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	INTERNAL PROCEDURES FOR THE REVIEW OF FEDERATION'S CONFLICT OF INTEREST STATEMENTS PROCEDURE FOR BOARD OF TRUSTEES AND BOARD OF DIRECTORS 1 PRIOR TO THE FIRST BOARD OF TRUSTEES MEETING AND THE FIRST BOARD OF DIRECTORS MEETING FOR EACH FISCAL YEAR, JEWISH FEDERATION DISTRIBUTES THE STATEMENT OF ETHICAL GUIDELINES TO ALL NEW AND RENEWING BOARD MEMBERS BOARD MEMBERS ARE ASKED TO READ THE DOCUMENT, COMPLETE AND SIGN THE CONFLICT OF INTEREST STATEMENT BOARD ONLINE OR VIA US MAIL 2 ONE MONTH AFTER THE CONFLICT OF INTEREST STATEMENT IS DISTRIBUTED TO ALL BOARD MEMBERS, THE DOCUMENT IS SENT A SECOND TIME TO ANY BOARD MEMBERS WHO DID NOT COMPLETE, SIGN AND RETURN THE CONFLICT OF INTEREST STATEMENT 3 ALL RESPONSES ON THE CONFLICT OF INTEREST STATEMENT ARE COMPLED AND THEN REVIEWED BY THE CHIEF EXECUTIVE OFFICER AND THE CHIEF FINANCIAL OFFICER A COMPREHENSIVE REPORT IS PROVIDED TO THE ETHICS COMMITTEE FOR REVIEW AND ANY REQUIRED ACTION STEPS 4 THE SIGNED CONFLICT OF INTEREST STATEMENTS ARE KEPT ON FILE FOR A PERIOD OF 7 YEARS PROCEDURE FOR JEWISH FEDERATION EMPLOYEES 1 IN CONCURRENCE WITH THE BOARD OF TRUSTEES AND BOARD OF DIRECTORS, THE DIRECTOR OF HUMAN RESOURCES DISTR IBUTES THE STATEMENT OF ETHICAL GUIDELINES VIA EWAIL AND REQUESTS THAT ALL EMPLOYEES REVIEW THE DOCUMENT AND COMPLETE AND SIGN THE CONFLICT OF INTEREST STATEMENT VIA ELECTRONIC SUR VEY 2 ALL JEWISH FEDERATION EMPLOYEE RESPONSES ARE REVIEWED BY THE DIRECTOR OF HUMAN RESOURCES OURCES AND THE CHIEF FINANCIAL OFFICER A COMPREHENSIVE REPORT IS PROVIDED TO THE ETHICS COMMITTEE FOR REVIEW AND ANY REQUIRED ACTION STEPS 3 THE ELECTRONIC RESPONSES TO THE CONFLICT OF INTEREST STATEMENT OF THE CHIEF FINANCIAL OFFICER A COMPREHENSIVE REPORT IS PROVIDED TO THE ETHICS COMMITTEE FOR REVIEW AND ANY REQUIRED ACTION STEPS 3 THE ELECTRONIC RESPONSES TO THE CONFLICT OF INTEREST STATEMENTS ARE KEPT ON FILE FOR A PERIOD OF 7 YEARS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	PROCESS FOR DETERMINING COMPENSATION AS IS THE CASE WITH ALL EMPLOYEES, THE JEWISH FEDERA TION IS COMMITTED TO PROVIDING MEMBERS OF THE EXECUTIVE MANAGEMENT TEAM (INCLUDING CHIEF E XECUTIVE OFFICER, OFFICERS AND KEY EMPLOYEES) WITH A FAIR AND REASONABLE BASE PAY OPPORTUNITY, REFLECTIVE OF FACH JOB'S VALUE TO THE ORGANIZATION AND CONSISTENT WITH PREVAILING LAB OR MARKET/INDUSTRY COMPENSATION PRACTICES PAY DECISIONS ARE MADE ON THE BASIS OF EMPLOYEES' QUALIFICATIONS AND ACTUAL PERFORMANCE. THE PROCESS FOR DETERMINING EXECUTIVE COMPENSATION ON INCLUDES THREE ELEMENTS (1) USE OF DATA TO DETERMINE COMPARABLE COMPENSATION), (2) REVIEW AND APPROVAL BY THE JEWISH FEDERATIONS COMPENSATION COMMITTEE, AND (3) DOCUMENTATION AND RECORDINE PING 1 USE OF DATA TO DETERMINE COMPARABLE COMPENSATION JEWISH FEDERATION WILL REVIEW CEO COMPENSATION DATA ON AN ANNUAL BASIS AND PROVIDE A SUMMARY OF THE DATA TO THE COMPENSATION COMMITTEE. CEO DATA WILL BE PROVIDED THROUGH JEWISH FEDERATIONS OF NORTH A MERICA'S ANNUAL EXECUTIVE COMPENSATION SURVEY AND OTHER SIMILARLY SITUATED ORGANIZATIONS DATA FOR OTHER EXECUTIVE POSITIONS WILL BE COLLATED BY AN INDEPENDENT CONSULTANT AT LEAST EVERY TWO YEARS 2 REVIEW AND APPROVAL OF EXECUTIVE COMPENSATION A) CEO THE COMPENSATION NO COMMITTEE WILL DISCUSS, NO LATER THAN AUGUST, UNLESS EMPLOYEE CONTRACT STATES OTHERWISE, THE PRESIDENT'S RECOMMENDATION REGARDING THE CEO'S SALARY AND BONUS THE COMMITTEE WILL B E PROVIDED WITH COMPARABLE DATA PRIOR TO APPROVING ANY RECOMMENDATIONS AT THE TIME OF THE DISCUSSION AND DECISION CONCERNING THE CEO'S COMPENSATION, THE CEO'S RECOMMENDATION SON THE EXECUTIVE SALARIES AND BONUSES WHICH BECOME EFFECTIVE THE FIRST FULL PAYROLL IN SEPTEMBER THIS COMMITTEE WILL ALSO DISCUSS, NO LATER THAN AUGUST, THE CEO'S RECOMMENDATION FOR EXECUTIVE SALARIES AND BONUSES WHICH BECOME EFFECTIVE THE FIRST FULL PAYROLL IN SEPTEMBER THIS COMMITTEE WILL ALSO DISCUSS NO LATER THAN AUGUST, THE CEO'S RECOMMENDATION AND RESERVED DEVINE AND THE REPORT OF THE EXECUTIVE ESAMED OF THE EXECUTIVE ESA

990 Schedule O, Supplemental Information

EWISHPHILLY ORG

Return

Reference	
FORM 990,	PUBLIC DISCLOSURE JEWISH FEDERATION BELIEVES IN FULL DISCLOSURE AND TRANSPARENCY THEREFO
PART VI,	RE, AT ANY TIME, ANYONE CAN REQUEST A COPY OF FORM 990, FORM 990T, AUDITED FINANCIAL STATE
SECTION C,	MENTS, FORM 1023, GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY AND IT WILL BE PROVID
LINE 19	ED TO THEM IT IS OUR POLICY TO RECEIVE THE REQUEST IN WRITING, SIGNED BY THE REQUESTOR, T
	O THE OFFICE OF THE CHIEF EXECUTIVE OFFICER OR THE OFFICE OF THE CHIEF FINANCIAL OFFICER.
	WE WILL RELEASE A COPY WITHIN A REASONABLE TIME BUT NOT TO EXCEED TEN BUSINESS DAYS OUR A
	NNI I A LIDITED EINANCIA L'STATEMENTS AND OUR FORM 990 MAY A L'SO RE FOLIND ON OUR WERSITE WWW.

Explanation

Return Explanation Reference

FORM 990,	EQUITY ON LOSS OF EXPONENT -243,714 CHANGE IN VALUE - NON-PARTICIPATING ASSETS 5,208,643
PART XI, LINE	CHANGE IN VALUE - CHARITABLE REMAINDER TRUST 33,388 CHANGE IN VALUE - CHARITABLE GIFT AN
9	NUITIES -382,235 PROVISION FOR UNCOLLECTIBLES -378,437 LOSS ON INTEREST RATE SWAP -38,33
	9 PENSION-RELATED CHANGES OTHER THAN NET PERIODIC COSTS -4.961,265 INVESTMENT INCOME FRO

M PARTNERSHIP 24.204 FORFEITED GRANTS 27.895 IN-KIND EXPENSES -995.812

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** 

DLN: 93493195011057 OMB No 1545-0047

## **Related Organizations and Unrelated Partnerships**

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

2015

Open to Public

Department of the Treasury

(Form 990)

► Attach to Form 990.

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

Inspection Internal Revenue Service Name of the organization **Employer identification number** JEWISH FEDERATION OF GREATER PHILADELPHIA 23-1500085

Part I Identification of Disregarded Entities Con		n answered "Yes" o					
(a) Name, address, and EIN (ıf applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations durin	<b>anizations</b> Complete if ig the tax year.	the organization ar	nswered "Yes" o	n Form 990, Part	: IV, line 34 because it	had on	e
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	n Public charity statu (if section 501(c)(3	(f) Us Direct controlling entity	Section (13) co	n 512(b) ontrolled
(1)FOUNDATION FOR JEWISH DAY SCHOOLS OF GREATER PHILADELPHIA 2100 ARCH STREET	TUITION ASSISTANCE/ JEWISH EDUCATION	PA	501(C)(3)	7	JEWISH FEDERATION OF GREATER PHILADELPHIA	Yes	No No
PHILADELPHIA, PA 19103 23-3087655							(g) Section 512(b) (13) controlled entity?  Yes No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	domicile (state or foreign	(d) Direct controlling entity	unrelated, excluded from	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1	partner?		<b>(k)</b> Percentage ownership
		country)		tax under sections 512- 514)					(Form 1065)			
							Yes	No		Yes	No	
	1											
Part IV Identification of Related Organizations Taxable	as a Corno	ration	or Trust (	omplete if th	e organiza	ition answ	wered	"Voc!	on Form 9	an c	Dart 1	TV line

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(1)	)
Name, address, and EIN of	Primary activity	Legal	Direct controlling		Share of total	Share of end-of-	Percentage	Section	
related organization		domicile	entity	(C corp, S corp,	ıncome	year	ownership	(b)(:	13)
- -		(state or foreign				assets	•	contro	lled
		country)		or trust)				entit	
		,,						Yes	No
								-	140
(1)JEWISH EXPONENT	PUBLISHING	PA	JEWISH	lc l	-243,714	-2,958,539	100 000 %	Yes	
			FEDERATION OF						
2100 ARCH STREET			GR PHILA						
PHILADELPHIA, PA 19103									
23-0734230									
CHARITABLE REMAINDER	CHARITABLE SPLIT	PA	JEWISH	T				Yes	
(2)TRUSTS (24)	INTEREST TRUST		FEDERATION OF						
			GR PHILA						
2100 ARCH STREET									
PHILADELPHIA, PA 19103									
· · · · · · · · · · · · · · · · · · ·									

Part V	Transactions With Related Org	janizations Complete if the	organization answered "Yes"	on Form 990,	Part IV, line 34,	35b, or 36.

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1a	Yes				
b	Gıft, grant, or capital contribution to related organization(s)	1b	Yes				
	<b>F</b>	<b>1</b> c		No			
		1d	Yes				
	<b>F</b>	1e		No			
f	Dividends from related organization(s)	1f		No			
		<b>1</b> g		No			
	h e e e e e e e e e e e e e e e e e e e	1h		No			
	<b>l</b>	1i		No			
	<b>F</b>	1j	Yes				
k		1k 1l	Yes	No			
l Performance of services or membership or fundraising solicitations for related organization(s)							
m Performance of services or membership or fundraising solicitations by related organization(s)							
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No			
o	Sharing of paid employees with related organization(s)	10		No			
_	Doumhurs amont hald to related arganization(s) for expanses	<b>1</b> p		No			
	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	1q	Yes	110			
q	Reimbursement paid by related organization(s) for expenses	-4	168				
r	Other transfer of cash or property to related organization(s)	1r		No			
s	Other transfer of cash or property from related organization(s)	1s		No			

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)JEWISH EXPONENT	А	57,890	ACCRUAL
(2)JEWISH EXPONENT	D	1,800,000	FAIR MARKET VALUE
(3)JEWISH EXPONENT	Q	85,608	ACCRUAL
(4) JEWISH EXPONENT	М	173,485	ACCRUAL

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

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

revenue) that was not a related organization. See instructions r													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	l end-of-year	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
													_ <del>_</del>
				l		L				l .	l		

