# Form **990**

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

OMB No 1545-0047

2016

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

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

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

Open to Public Inspection

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<u>A</u>	Fo	or the	2016 calendar year, or tax year beginning	, 2016, an	a enaing		, 20							
В	Ch	eck if a	applicable C Name of organization Yehuda & Ann	ne Neuberger Foundation, Inc.		D	Employer ider	tification number						
	] Ad	dress	change Doing business as			27	7-1040796							
	] Na	ıme ch	ange Number and street (or P O box if mail is	s not delivered to street address)	Room/suite	ET	elephone num	ber						
	] Init	tial retu	irn 101 West Mount Royal Avenue			410-727-4828								
	] Fin	al retur	/terminated City or town, state or province, country,	and ZIP or foreign postal code										
一	-		return Baltimore, MD 21201			G	<b>G</b> Gross receipts \$ 2,101,268							
〒	-		on pending F Name and address of principal officer				Is this a group return for subordinates? Yes X No							
_	υ ΛÞ	pacatio	The pending					ed? Yes No						
-			npt status	) ◀ (insert no ) ☐ 4947(a)(1) or ☐	527			ee instructions)						
<u>'</u> -		ebsite:		) 4 (IIISelt 110 ) 4947 (a)(1) 01	ا22 لـ									
7			<del></del>	□ Other ► I Vers	of formation	H(c) Group exe								
			rganization X Corporation Trust Association	L Year	or formation	2009	M State of lega	I domicile MD						
, 📕	Par	_	Summary				<del></del>	<del></del>						
)	- 1		Briefly describe the organization's mission											
	3		charitable, educational and religious purposes of The Associated: Jewish Community Federation of Baltimore, Inc. (The Associated)											
, ,	<u> </u>		The Foundation makes grants to public charitable organizations in furtherance of the mission of The Associated											
	<u> </u>	2	Check this box $lacktriangle$	continued its operations or disp	osed of r	more than 25	% of its ne	t assets.						
	3	3	Number of voting members of the governi	ng body (Part VI, line 1a) .			3	6						
•	5	4	Number of independent voting members o	of the governing body (Part VI, I	ıne 1b)		4	5						
TK [1]	<u> </u>	5	Total number of individuals employed in c	alendar year 2016 (Part V, line 2	2a)		5	0						
		6	Total number of volunteers (estimate if neo	cessary)			6	5						
¥ ₹	ē		Total unrelated business revenue from Par				7a							
7	`		Net unrelated business taxable income fro				7b							
POSTIMARK II	+-		tot amoiated boomeou taxabio into into		·	Prior Year	<del>                                     </del>	Current Year						
Š		8	Contributions and grants (Part VIII, line 1h	)		93,05	3.000							
	3		Program service revenue (Part VIII, line 2g		3,000									
3	5 4		Investment income (Part VIII, column (A), li			1 21	5,766	2,101,268						
ຸ ດ	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓			1,31	3,700	2,101,200								
(J)	- 1		Other revenue (Part VIII, column (A), lines		.40\ -	04.26	9.766	2 101 260						
			Total revenue—add lines 8 through 11 (mus		12)	94,36		2,101,268						
3	- 1		Grants and similar amounts paid (Part IX,		·	67	0,710	2,681,000						
3	- 1		Benefits paid to or for members (Part IX, c			0								
	ខ្ច   1		Salaries, other compensation, employee ber		-10)			0						
Evnonge e	2   1		Professional fundraising fees (Part IX, colu		<u> </u>			0						
} }	<del>[</del>		Total fundraising expenses (Part IX, colum											
5 ц	¹   1	7	Other expenses (Part IX, column (A), lines	11a–1 <u>1d, 11f–24e)</u>			3,072	13,273						
•	1	8	Total expenses. Add lines 13–17 (must eq	ual Part IX, ஜிஹ்ரி(A),[1/1/e=25]	- [	67.	3,782	2,694,273						
5	1	9	Revenue less expenses Subtract line 18 f	rom line 12	_lor_	93,69	4,984	(593,005)						
, To	SS			8 0 2017	S	inning of Curren	t Year	End of Year						
ets	Balances 2	20	Total assets (Part X, line 16)	JUL 2 8 2017	SO Beg	99,62	2,245	88,144,632						
Ass	삅 2	1	Total liabilities (Part X, line 26)		그때		0	0						
Š	⊏!		Net assets or fund balances. Subtract line	21 from lineQGDEN UT		99,62	2,245	88,144,632						
	art		Signature Block			= =								
			ies of perjury, I declare that I have examined this retu	rn, including accompanying schedules a	and statemer	nts, and to the b	est of my know	vledge and belief it is						
t	rue, c	orrect	and complete Declaration of preparer (other than off	icer) is based on all information of which	preparer ha	s any knowledge	e							
							7/19/1	7						
S	ign		Signature of officer			Date	* ( * * * * * * * * * * * * * * * * * *	<b>-</b>						
	ere		Marc B. Terrill President											
•	•••		Type or print name and title	_ <del></del>			<del></del>	<del></del>						
_			<u></u>	eparer's signature	Date	<del></del> -		PTIN						
	aid			,			check if   elf-employed	•						
	•	are	1											
U	se	Only				Firm's E								
-		1 1000	Firm's address >	about 2 (age in the saline ship		Phone r	10							
_	_ <u>-</u> _		S discuss this return with the preparer sho	<del></del>	•	· _	<del></del>	Yes No						
	- D-		ork Reduction Act Notice, see the senarate i	inetructione			<i>,</i>	Form <b>990</b> (2016)						

(Code <sup>.</sup> ) (	Expenses \$	including grai	nts of \$	) (Revenue \$	)
					·
Other program servi	ces (Describe in Sched	ule O)			
(Expenses \$	ıncluding grar	nts of \$	) (Revenue \$	)	
Total program service	e expenses >	2,681,000			

Part	IV Checklist of Required Schedules			
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
' &	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	8		X
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			
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	9		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.	10	* 6	X
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		v
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	}	<u>X</u> _
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		X X
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		<u>X</u>
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		Х
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		X
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		X
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Dort IV	Checklist o	f Poquired Se	hadulaa	(continued)
Part IV .	CHECKISLO	ı Nequireu St	, iieuuies	(CONUNIUEU)

			Yes	No
20 <sub>ą</sub>	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
-√b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		X
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a	-	x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  Schedule L, Part IV	28a 28b		X X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_ <u></u>
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		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	X	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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.	35a 35b	7	X X
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		_ <u></u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			_ <del></del> -,
38	Part VI	37	_   v	<u>X</u>
			<u>X  </u> 990 (	2016)

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Part	Statements Regarding Other IRS Fillings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<del></del> -	Yes	No
45	E. J. J. Land and the Day O of Four 4000 Fator O if not applicable	$\overline{}$	res	NO
1 <u>a</u>	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 0  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
b	Enter the transport of the second of the sec	1 1		i
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b> </b>		ļ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a		_X_
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	1 1		
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
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).			_
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1 1	Í	
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter		•	
а	Initiation fees and capital contributions included on Part VIII, line 12		1	Ì
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	1
11	Section 501(c)(12) organizations. Enter	.		
а	Gross income from members or shareholders		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources		}	Ì
	against amounts due or received from them.)		l	į
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	.		[
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which		ļ	
_	the organization is licensed to issue qualified health plans	, 1	Ì	
С	Enter the amount of reserves on hand	1	Ì	1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		_ <u>X</u>
14a h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
b	in 100, has it med a committee to report these payments. It is provide an explanation in conedule of	1-40	1	

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule			
_	Check if Schedule O contains a response or note to any line in this Part VI			$\overline{\mathbf{X}}$
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	6		
b 2	Enter the number of voting members included in line 1a, above, who are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship or any other officer, director, trustee, or key employee?	5 with 2	\	
3	Did the organization delegate control over management duties customarily performed by or under the di supervision of officers, directors, or trustees, or key employees to a management company or other person?	rect 3		х
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appone or more members of the governing body?	4 5 6 oint 7a	X	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) memb stockholders, or persons other than the governing body?		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken dur the year by the following.		A	
а	The governing body?	. 8a	X	
b	Each committee with authority to act on behalf of the governing body?	. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	d at		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal R	evenue C	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapter affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		-	X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form		X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a cts? 12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye describe in Schedule O how this was done	es," 12c	х	
13	Did the organization have a written whistleblower policy?	13		Χ
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			X
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	<b> </b>	X
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem with a taxable entity during the year?	ent 16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	ıts		X
	organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Se 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)	ction 501	(c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of financial statements available to the public during the tax year	of interest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books ar Marilyn Loux 101 West Mt. Royal Avenue Baltimore, MD 21201 410-727-4828	ıd records	•	

# 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

[X]

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

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

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

Check this box if heither the organization	Thor any relate	u org	arıız			ompe	1150	led any currer	it officer, director	, or trustee
					C)			į	. !	
(A)	(B)	age box, unless person is both an					nne	(D)	(E)	(F)
Name and Title	Average						n an	Reportable	Reportable	Estimated
	hours per week (list any	(list any					<u> </u>	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Instr	Officer	e e		Former	the	organizations	compensation
	related organizations	recto	Institutional trustee	ĕ	Key employee	loye	ब	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	약불	nal t		loye	eom		ĺ		and related
	line)	stee	trust		1 16	pens	ļ		1	organizations
			ee			Highest compensated employee				
(1) Marc B Terrill	25		1	!						
President and Public Director	40 0	X		X				0	802,129	92,050
(2) Yehuda Neuberger	26			_						
Vice President and Donor Director		X		X			1	0	0	0
(3) Anne Neuberger	25									
Secretary/Treasurer and Donor Director		X		X				0	0	0
(4) Bruce Sholk	25									
Public Director		_X						0	} o }	0
(5) Genine Macks Fidler	.25									
Public Director		_X						0	00	0
(6) Laurence Katz	.25									
Public Director		X						0	00	0
(7)					İ				1	
(8)										
(9)							-			
(10)										
(11)					_					
(12)										
				-						
(13)										
(14)										
		L						L		- 000

`	(A) Name and title	(B) Average hours per week (list any	box, i	unles er and	eck s pe l a d	ntion more rson irecte	than o	an (ee)	(D)  Reportable compensation from	(E)  Reportation compensation related	n from	(F) Estimated m amount of other		
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-F		fro orga and	pensation the anization related inization	on ed
(15)					i	_				1				
(16)														
(17)														
(18)		_							<u> </u>					
(19)							<u></u>							
(20)							_							
(21)														
(22)														
(23)														
(24)														
(25)														
С	Sub-total . Total from continuation sheets to Part	VII, Sectio	n A	•		•		<b>\</b>	0		2,129			92,056
d	Total (add lines 1b and 1c)  Total number of individuals (including but reportable compensation from the organi		l to th	ose	list	ed a	above	e) wl	ho received mo		2,129   00,000 c	of .		92,056
3	Did the organization list any former of employee on line 1a? If "Yes," complete							mp	loyee, or high	est compe	nsated		Yes	No
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ole d	com	per	nsatio					3		X
5	Individual  Did any person listed on line 1a receive of for services rendered to the organization?									:ation or ind	lividual	5	X	X
Section	on B. Independent Contractors													<u> </u>
1	Complete this table for your five highest of compensation from the organization. Replyear													.ax
	(A) Name and business add	ress							(B) Description of s	ervices	Co	(C) ompens	ation	
None														
					_									
								$\vdash$						

Pai	rt VIII	•		_ •				Page
r		Check if Schedule	O contains a re	sponse or note t	o any line in this	Part VIII		
			-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	, oaciaioa campaig.	ns 1a					312-314
Gra	b		. 1b		]			
ts,	С	J		<del></del>	]			
ia ig	d	J						
Sir	e f	3	intributions) 1e					
e E	'	and similar amounts not in	and the state of t					
혈호	g			<u> </u>				
Cor	h					i		
	† ·	10 100 10	·· · · · · · · · · · · · · · · · · · ·	Business Code	0			
ven	2a				<del> </del>	<del></del>		
æ	b							
Program Service Revenue	С							
	d							
ящ	е							
rogr	f	All other program ser						
Δ.	g	Total. Add lines 2a-2			0			
	3	Investment income	(including divid	lends, interest,				
		and other similar amo			1,986,253			1,986,25
	5	Income from investmen	it of tax-exempt b	ond proceeds				
	3	Royalties	(i) Real	(ii) Personal				
	6a	Gross rents	(i) iteal	(ii) Fersonal				
	b	Less. rental expenses		<del> </del>		İ		
	c	Rental income or (loss)	0	0		į		
	d	Net rental income or					<del></del>	
	7a	Gross amount from sales of	(i) Securities	(ii) Other	0			
		assets other than inventory	115,015		i			
	b	Less cost or other basis						
		and sales expenses			ĺ			
	С	Gain or (loss)	115,015	0				
	d	Net gain or (loss)			115,015			115,015
<u>a</u>	•							
Ju .	ъа	Gross income from fuevents (not including \$	ındraisıng					:
e K		•			İ			
2		of contributions reported See Part IV, line 18	•					
Other Revenue	b	Less direct expenses	a					
0		Net income or (loss) fr		events . >		]-		
	9a	Gross income from ga	iming activities	events .	0			
	<b>L</b>		· · a			1		
1		Less: direct expenses Net income or (loss) fr		vities .				
		Gross sales of in		vities .	0			
ĺ		returns and allowance					[	
	b	Less cost of goods so	a					
	c	Net income or (loss) fr		entory <b>&gt;</b>				
r		Miscellaneous Re		Business Code	0			
ľ	11a							
	b							
	С						<del></del>	
	ď	All other revenue						<del></del>
	е	Total. Add lines 11a-1	11d ˈ	▶	0	-		

0 2,101,268

Total revenue. See instructions.

	IX. Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must con			s must complete co	olumn (A)
	Check if Schedule O contains a respon				·
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2 (01 000	2 (21 222		
_	-	2,681,000	_2,681,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22			<del></del>	
3	Grants and other assistance to foreign	ĺ			
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees			···	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages .				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				X.
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	13,273		13,273	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel				
	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance .				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	1	1		
	line 24e amount exceeds 10% of line 25, column		1		
	(A) amount, list line 24e expenses on Schedule O)	İ		,	
а					
b					
С					
d					
е	All other expenses  Total functional expenses. Add lines 1 through 24e				
25		2,694,273	2,681,000	13,273	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here    if following SOP 98-2 (ASC 958-720)				

Cash—non-interest-bearing	Р	art X				
1			Check if Schedule O contains a response or note to any line in this Par		<del></del>	<u> </u>
2 Savings and temporary cash investments 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustess, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4698(NI)), persons described in section 4988(NI), persons described in described in section 4988(NI), persons described in section 4988(NI), persons described in described in described in section 4988(NI), persons described in desc		`				
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4888(0)), persons described in section 4888(0), person described in section 4888(0), person described in section 4888(0), and contributing employers and sponsoring organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 9 Prepard expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part II of Schedule D 10b Less: accumulated depreciation 11 Investments—publicly traded securities 11 Investments—burber securities See Part IV, line 11 12 Investments—burber securities See Part IV, line 11 13 Investments—burber securities See Part IV, line 11 14 Intangble assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Tax-exempt bond liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Other liabilities (including federal income tax, payables to related third parties 27 Unrestricted net assets 28 Temporanly restricted net assets 29 Organizations that follow SFAS 117 (ASC 958), check here land complete lines 30 through 34. 29 Retained earnings, endowment, accumulated income, or other funds 30 Capital stock or tr		1	Cash—non-interest-bearing	<del></del>	<del></del>	
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, tusteses, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f(II)), persons described in section 4958(f(II)), persons described in section 4958(f(II)), persons described in section 4958(f(III)), persons described in section 4958(		2	Savings and temporary cash investments			<del></del>
1		3	Pledges and grants receivable, net			<del> </del>
trustees, key employees, and highest compensated employees Complete Part II of Schedule L  6 Lams and other receivables from other disqual/fied persons (as defined under section 4956/(f/I), persons described in section 4956((g/X)), and contributing employers and sponsoning organizations of section 501(c/g) voluntary employees and sponsoning organizations (see instructions) Complete Part II of Schedule L  7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part IV of Schedule D 10 Less: accumulated depreciation 11 Investments—publicly traded securities 1 10 Less: accumulated depreciation 12 Investments—publicly traded securities 1 10 Less: accumulated depreciation 13 Investments—program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Total assets. Add lines 1 through 15 (must equal line 34) 19 Deferred revenue 10 Tax exempt bond liabitities 10 Ecrevenue 11 Escrow or custodial account liability. Complete Part IV of Schedule D 12 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqual/filed persons Complete Part IV of Schedule D 12 Loans and other liabilities not included on lines 17:24). Complete Part X of Schedule D 12 Cart ilabilities. Add lines 17 through 25 10 Typical ilabilities. Add lines 17 through 25 10 Typical ilabilities. Add lines 17 through 25 10 Typical ilabilities. Add lines 17 through 25 10 Typical ilabilities. Add lines 17 through 25 10 Typical ilabilities. Add lines 37 and 31 Pad-in or capital surplus, or land, building, or equipment fund 11 Experimental ilability. Complete Inad complete lines 27 through 28 and income tax, payables to related third parties 12 Permanently restricted net assets 13 Typical ilabilities. Add lines 17 through 25 14 Typical ilabiliti		4			4	357,600
Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4959(f/1)), persons described in section 4959(g/3)(8), and contributing employers and sponsoning organizations (see instructions) Complete Part II of Schedule L  7 Notes and loans receivable, net  8 Inventiones for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment, cost or other basis. Complete Part II of Schedule D  b Less: accumulated depreciation  11 Investments—publicly traded securities  11 Investments—other securities See Part IV, line 11  12 Investments—publicly traded securities  13 Investments—publicly traded securities  15 Other assets See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  17 Accounts payable and accrued expenses  17 Accounts payable and accrued expenses  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  22 Cans and other payables to current and former officers, directors, trustees, key employees, highest compensated third parties  23 Covered mortages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties  26 Organizations that follow SFAS 117 (ASC 958), check here   27 Unrestricted net assets  28 Temporanity restricted net assets  29 Organizations that follow SFAS 117 (ASC 958), check here   29 Corganizations that do not follow SFAS 117 (ASC 958), check here   20 Capital stock or trust principal, or current funds  31 Total net assets or fund balances  32 Total liabilities, endowment, accumulated income, or other funds  33 Total net assets or fund balances  34 Total leabiliti		5				
4958(f)(1), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(8) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 7  Notes and Ioans receivable, net 7 7  Notes and Ioans receivable, net 8 8 Inventiones for sale or use 9 8 9  Prepaid expenses and deferred charges 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		l	Complete Part II of Schedule L		5	
7   Notes and loans receivable, net   7   8   Inventories for sale or use   9   Prepaid expenses and deferred charges   9   10a		6	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			
3 Prepaid expenses and deferred charges   9   10a	ets	_	· · · · · · · · · · · · · · · · · · ·		<del> </del>	
3 Prepaid expenses and deferred charges   9   10a	SS		·		<del></del>	
10a	⋖	_			<del>   </del>	
b Less: accumulated depreciation   10b   10c   11mestments—publicly traded securities   1.094,245   11   1.71,0   12mestments—publicly traded securities   1.094,245   11   1.71,0   13   1nvestments—program-related See Part IV, line 11   98,528,000   12   87,616,0   13   11mestments—program-related See Part IV, line 11   14   11mangible assets   14   14   11mangible assets   15   15   15   15   15   15   15   1			Land, buildings, and equipment. cost or	<del></del>	9	
11   Investments—publicly traded securities   1.094,245   11   171,1   12   Investments—other securities See Part IV, line 11   98,528,000   12   87,616,0   13   Investments—program-related See Part IV, line 11   13   14   15   15   15   15   15   15   15		<b>L</b>	· · · · · · · · · · · · · · · · · · ·	······································	100	
12   Investments—other securities See Part IV, line 11   98,528,000   12   87,616,01   13   Investments—program-related See Part IV, line 11   13   Intangble assets   14   15   Other assets See Part IV, line 11   15   15   15   16   Total assets. Add lines 1 through 15 (must equal line 34)   99,622,245   16   88,144,6   17   Accounts payable and accrued expenses   17   18   Grants payable and accrued expenses   18   18   19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L   22   23   24   Unsecured notes and loans payable to unrelated third parties   23   24   Unsecured notes and loans payable to unrelated third parties   24   25   26   Other habilities (including federal income tax, payables to related third parties, and other liabilities of including federal income tax, payables to related third parties   24   25   Other habilities (including federal income tax, payables to related third parties   25   26   Organizations that follow SFAS 117 (ASC 958), check here				1 094 245	-	171,032
13   Investments—program-related See Part IV, line 11   14   14   15   15   15   15   15						87,616,000
14			F			
15 Other assets See Part IV, line 11			· ·	<del></del>		<del></del>
16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability. Complete Part IV of Schedule D  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25  27 Unrestricted net assets  28 Temporanly restricted net assets  29 Permanently restricted net assets  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  99,622,245 34 88,144,6  17 Total liabilities and net assets/fund balances  99,622,245 34 88,144,6  18 8,144,6  18 18  18 18  18 18  18 18  19 20  20 21  21 22 23  22 22  23 24  24 25  25 25  26 Total liabilities including federal income tax, payables to related third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Organizations that follow SFAS 117 (ASC 958), check here  and complete lines 27 through 29, and lines 33 and 34.  25 Total liabilities and net assets  28 Permanently restricted net assets  29 Permanently restricted net assets  30 31 Paid-in or capital surplus, or land, building, or equipment fund  31 32 Retained earnings, endowment, accumulated income, or other funds  32 7 10 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						<del></del>
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19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 25 Total liabilities. Add lines 17 through 25 0 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 99,622,245 27 88,144,6 28 Temporarily restricted net assets 99,622,245 27 88,144,6 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 99,622,245 34 88,144,6 34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6 36 Retained earnings. 88,144,6 36 Retained earnings endowment, accumulated income, or other funds 99,622,245 34 88,144,6 34 Retained earnings endowment, accumulated income, or other funds 99,622,245 34 88,144,6 34 Retained earnings endowment, accumulated income, or other funds 99,622,245 34 88,144,6 34 Retained earnings endowment, accumulated income, or other funds 99,622,245 34 88,144,6 34 Retained earnings endowment endowme					18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 25 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporanly restricted net assets 29 Permanently restricted net assets 00 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,64,144,144,144,144,145,144,144,144,144,14			· · ·		19	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  28 Temporarily restricted net assets 29 Permanently restricted net assets Corganizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,65		20	Tax-exempt bond liabilities	<del></del>	20	
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		21			21	
trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other habilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Corganizations that follow SFAS 117 (ASC 958), check here I and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  29 Permanently restricted net assets  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  31 Total net assets or fund balances  32 Total liabilities and net assets/fund balances  34 Total liabilities and net assets/fund balances  35 Secured mortgages and notes payable to unrelated third parties  24 Unsecured hotes and loans payable to unrelated third parties  24 Data third parties  25 Charlities and other liabilities and not assets complete Part X of Schedule	S	22	The state of the s			
Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total liabilities and net assets/fund balances  99,622,245 33 88,144,6  99,622,245 33 88,144,6  10 1 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3	litie		trustees, key employees, highest compensated employees, and			
Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.  Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fund  Retained earnings, endowment, accumulated income, or other funds  Total liabilities and net assets/fund balances  99,622,245 33 88,144,6  99,622,245 33 88,144,6  10 1 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3	abi		disqualified persons Complete Part II of Schedule L		22	
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	Ë	23				
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties .		24	
Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets		25	parties, and other liabilities not included on lines 17-24). Complete Part X			
Organizations that follow SFAS 117 (ASC 958), check here  and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets  99,622,245 27 88,144,6  Temporarily restricted net assets  28  Permanently restricted net assets  29  Permanently restricted net assets  29  Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.  Capital stock or trust principal, or current funds  30  Paid-in or capital surplus, or land, building, or equipment fund  31  Retained earnings, endowment, accumulated income, or other funds  32  Total net assets or fund balances  99,622,245 33 88,144,6  Total liabilities and net assets/fund balances  99,622,245 34 88,144,6			<del> -</del>			
Complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here Organizatio		26		0	26	0
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	ses					
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	au	27	Unrestricted net assets	99,622,245	27	88,144,632
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	Bal	28	Temporarily restricted net assets		28	<del></del>
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	٦	29			29	
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	or Fur	!				
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	ts (	30	Capital stock or trust principal, or current funds		30	
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	sse	31				
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	Ä	32	Retained earnings, endowment, accumulated income, or other funds.			
34 Total liabilities and net assets/fund balances 99,622,245 34 88,144,6	Ne	33				88,144,632
		34	Total liabilities and net assets/fund balances	99,622,245	34	88,144,632 Form <b>990</b> (2016)

Page	1	1

	_ ` · · ·				-3
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,10	01,268
2 `	Total expenses (must equal Part IX, column (A), line 25)	2		2,69	94,273
3	Revenue less expenses Subtract line 2 from line 1	3		(59	93,005)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		99,62	22,245
5	Net unrealized gains (losses) on investments	5		(10,88	34,608)
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		88,14	14,632
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			,	
				Yes	No
1	Accounting method used to prepare the Form 990 🖾 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O	plain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com				
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	•		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a	<del></del>		
	separate basis, consolidated basis, or both				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		-		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersight			
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ın			$\neg$
	Schedule O			İ	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a	_ ]	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b		
			Forn	n <b>990</b>	(2016)

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

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

r enu	ida & Anne Neuberger Foundation, Inc.					[ 27-1040796		
Pai	rt I Reason for Public Chari	ity Status (All	organizations must	comple	te this p	art ) See instruction	ns.	
he o	organization is not a private foundat	ion because it is	s: (For lines 1 through	12, chec	k only or	ne box.)		
1	A church, convention of church	es, or association	on of churches descri	bed in se	ection 17	0(b)(1)(A)(i).		
2	A school described in section 1	l 70(b)(1)(A)(ii).(	(Attach Schedule E (F	orm 990	or 990-E	Z).)		
3	A hospital or a cooperative hos							
4	A medical research organization hospital's name, city, and state		onjunction with a hosp	otal desc	ribed in s	section 170(b)(1)(A)	(iii). Ente	r the
5	An organization operated for the section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit d	escribed in
6	A federal, state, or local govern	ment or governi	mental unit described	in section	on 170(b)	(1)(A)(v).		
7	An organization that normally r described in section 170(b)(1)(a)			oort from	a gover	nmental unit or fron	the ge	neral public
	☐ A community trust described in			Dowt II \				
8 9				•				-A II
3	☐ An agricultural research organiz or university or a non-land-gran university	t college of agri	iculture (see instruction	ns) Ente	r the nan	ne, city, and state of	the coll	ege or
10	An organization that normally re receipts from activities related to support from gross investment acquired by the organization affi	o its exempt fui income and uni	nctions—subject to ce related business taxal	ertain exc ole incom	ceptions, ie (less si	and (2) no more that ection 511 tax) from	n 33¹/₃%	of its
11	☐ An organization organized and		•		•	•		
12		•	•	•			ry out th	e purposes
	of one or more publicly suppor							
	Check the box in lines 12a throu	igh 12d that des	scribes the type of sup	porting o	rganızatı	on and complete line	s 12e, 1	2f, and 12g
а	_ :	•	•	•		•		, ,
	the supported organization(					he directors or trust	ees of th	е
	supporting organization Yo	-						
b	_ ,, ,,							
	control or management of the organization (s). You must c				persons	that control or man	age the s	supported
С	Type III functionally integrates its supported organization(s						ally integ	rated with,
d	that is not functionally in requirement (see instruction	rated. The orgai	nization generally mus	st satisfy	a distribu	ition requirement an		
_		-	-				ит.	
е	Check this box if the organized functionally integrated, or Ty						ıı, ıype	111
f	Enter the number of supported or		• •		•		Γ	1
ď	Provide the following information	about the supp	orted organization(s)	•			• ь	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(IV) Is the c	rganization	(v) Amount of monetary	(vi) A	mount of
			(described on lines 1–10		r governing ment?	support (see	other si	upport (see
			above (see instructions))	docui	nent /	instructions)	Instr	uctions)
_				Yes	No			
۲ ر <u>م</u>	The Associated: Jewish							
<u>~'</u> (		52-0607957_	10	X		100,000		0
B)								
C)								
D)								
E)			r					
		kari jedika itakili:	A SACA- FUNE DE MILITARIO	a lefel wi	1 15 15 15	100,000		

							Page <b>2</b>
Pai	t II 、Support Schedule for Organiz	ations Desc	ribed in Sect	tions 170(b)(	1)(A)(iv) and	170(b)(1)(A)(y	/i)
	(Complete only if you checked t	he box on lin	e 5, 7, or 8 of	f Part I or if th	ne organizatio	on failed to di	ialify under
	Part III. If the organization fails t	o qualify und	er the tests li	sted below, p	lease compl	ete Part III)	y u//20/
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						(1) (2)
	membership fees received (Do not						
	include any "unusual grants.") .						
2	Tax revenues levied for the						
	organization's benefit and either paid	1			i	1	
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the					İ	
	organization without charge			ļ			<u> </u>
4	Total. Add lines 1 through 3						
5	The portion of total contributions by		İ				
	each person (other than a						
	governmental unit or publicly				l		
	supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)			į			
6	Public support. Subtract line 5 from line 4						
_	ion B. Total Support	<u> </u>	<u> </u>			Ĺ	
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(6) T-4-1
7	Amounts from line 4	(_,	(5) 20 10	(0) 2014	(d) 2013	(e) 2016	(f) Total
8	Gross income from interest, dividends,	,,					
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
9	Net income from unrelated business				· · · · · · · · · · · · · · · · · · ·		
	activities, whether or not the business						
	is regularly carried on						
10	Other income Do not include gain or						
	loss from the sale of capital assets						
44	(Explain in Part VI.)						
11 12	Total support. Add lines 7 through 10						
13	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, second	d, third, fourth,	or fifth tax ye	ear as a section	n 501(c)(3)
Secti	on C. Computation of Public Suppor		<del></del>	• •	•	· · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2016 (line 6			1 column (f)		44	
15	Public support percentage from 2015 Sch	edule A. Part I		· · · · ·		15	<u>%</u>
16a	331/3% support test—2016. If the organization	zation did not	check the box	on line 13 an	ا     . 32 عا 14 And h	10% or more.	%
	box and stop here. The organization qual	ifies as a publi	cly supported	organization		7370 OI MOIE, C	
b	331/3% support test—2015. If the organiz	zation did not	check a box or	n line 13 or 16a	a. and line 15 i	Is 33½% or mo	. ► □
	this box and stop here. The organization	qualifies as a p	oublicly suppor	ted organization	on .		>rc, check
17a	10% -facts-and-circumstances test—20	16. If the orga	nızation dıd no	ot check a box	on line 13 16	Sa or 16b and	line 14 is
	10% or more, and if the organization me	ets the "facts-	and-circumsta	inces" test, chi	eck this box a	nd ston here	Evoluin in
	Part vi now the organization meets the "f	acts-and-circi	umstances" tes	st The organiz	ation qualifies	as a publicly s	supported
	organization					•	. ▶ □
b	10% -facts-and-circumstances test—20	15. If the orga	ınızation did no	ot check a box	on line 13. 16	6a, 16b. or 17a	and line
	15 is 10% or more, and if the organizat	tion meets the	e "facts-and-ci	ircumstances"	test, check ti	his box and st	on here
	explain in Part VI now the organization m	eets the "fact	s-and-circums	tances" test T	he organization	on qualifies as	a publicly
40	supported organization						. ▶ □
18	<b>Private foundation.</b> If the organization did instructions	I not check a b	oox on line 13,	16a, 16b, 17a,	or 17b, check	this box and s	ee
			·	<u> </u>			▶ 🖂

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose				L		
3	Gross receipts from activities that are not an					_	
	unrelated trade or business under section 513						
4	Tax revenues levied for the		1		ì		
	organization's benefit and either paid to or expended on its behalf	ı					
5	The value of services or facilities						
	furnished by a governmental unit to the		1				
	organization without charge		<u></u>				
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3	_					<del></del>
	received from disqualified persons .				<u></u>		
b	Amounts included on lines 2 and 3		[				
	received from other than disqualified		1				
	persons that exceed the greater of \$5,000		<b>,</b>				
	or 1% of the amount on line 13 for the year		ļ				
C	Add lines 7a and 7b  Public support. (Subtract line 7c from						
8	luna C \		Į.		[	l	
Secti	on B. Total Support	L <u></u>	<u> </u>	<u> </u>	<u> </u>		
	dar year (or fiscal year beginning in) ▶	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	(4) 20.2	(2) 2010	(0) 2011	(4) 2010	(6) 2010	(i) Total
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			· ·			
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		ļ				
	acquired after June 30, 1975						
С	Add lines 10a and 10b .						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on		<u> </u>				
12	Other income Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	e organization	a's first secon	d third fourth	or fifth tay ve	ar as a section	501(c)(3)
	organization, check this box and stop he	_			•		· <b>&gt;</b> □
Section	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8			3, column (f))	<del></del>	15	%
16	Public support percentage from 2015 Sch	nedule A, Part	III, line 15			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (	line 10c, colur	nn (f) divided b	y line 13, colur	nn (f))	17	%
18	Investment income percentage from 2015					18	%
19a	331/3% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box	-	<del>-</del>			-	
b	331/3% support tests—2015. If the organiz						
	line 18 is not more than 331/3%, check this i		_	•	•	•	
20	Private foundation. If the organization di	u noicheck a	DOX ON line 14.	. 19a. or 19b. c	neck this box	and see instruc	tions

Part IV . Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Secti	on A. All Supporting Organizations			<del>,</del>
			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	X	
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		X
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		X
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		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		X
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		X
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> 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		X
5а	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 <b>Part VI</b> , 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		X
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		X
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		X
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		X
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		X
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		X
b	Did one or more disqualified persons (as defined in line 9a) 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		X
С	Did a disqualified person (as defined in line 9a) 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		X
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10a		X

	EA ( 6111 330 61 330-12) 2010			- age o
Part	Supporting Organizations (continued)		Yes	No
44	Has the organization accepted a gift or contribution from any of the following persons?	$\overline{}$	162	NO
11	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		}	
а	below, the governing body of a supported organization?	11a	ļ	
<b>L</b>	A family member of a person described in (a) above?	11b	<del>                                     </del>	X
		11c	<del> </del>	X
	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.  on B. Type I Supporting Organizations	116	L	X
Secti	Of B. Type I Supporting Organizations		Yes	No
4	Did the directors, trustees, or membership of one or more supported organizations have the power to		res	NO
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	Ì	Ì	1
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	<del>  '-</del>		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	·	}	
	supervised, or controlled the supporting organization	2		ļ <sup>1</sup>
Secti	on C. Type II Supporting Organizations			L
0001	on o. Type is oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		l
Secti	on D. All Type III Supporting Organizations	۰.		L.——
	on promise of positions		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			<del>'''</del>
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	i .		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	'		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		 
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's		l	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ctions	
	☐ The organization satisfied the Activities Test Complete line 2 below	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•/
a b	☐ The organization satisfied the Activities restriction for the parent of each of its supported organizations. Complete line 3 below			
C	☐ The organization is the parent of each of its supported organizations. Complete time 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	see in	etructi	ionel
·				
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			.
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		j	.
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	l		;
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		•	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		l	İ
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u>  </u>	]	۱ لـــــــ
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	ļ	<del></del>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V , Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	zations	<del></del>
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		<u> </u>
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	<u> </u>	<u> </u>
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	L	
e Discount claimed for blockage or other factors (explain in detail in Part VI).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	•	
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	y int	tegrated Type III supporti	ng organization (see

Par	V 、Type III Non-Functionally Integrated 509(a)(	<ol><li>Supporting Orgar</li></ol>	nizations (continued)					
Sect	tion D - Distributions			Current Year				
	1 Amounts paid to supported organizations to accomplish exempt purposes							
2	Amounts paid to perform activity that directly furthers exempt purposes of supported							
	organizations, in excess of income from activity	•						
	Administrative expenses paid to accomplish exempt purp	poses of supported org	anizations					
4	Amounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval required)	)						
6	Other distributions (describe in Part VI) See instructions.							
	Total annual distributions. Add lines 1 through 6.	·						
8	Distributions to attentive supported organizations to which	ch the organization is re	sponsive					
	(provide details in Part VI) See instructions	· · · · · · · · · · · · · · · · · · ·						
9	Distributable amount for 2016 from Section C, line 6	<u> </u>						
10	Line 8 amount divided by Line 9 amount							
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016				
1_	Distributable amount for 2016 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI) See instructions							
3	Excess distributions carryover, if any, to 2016							
а								
b								
С	From 2013							
d	From 2014 .							
е	From 2015							
f	Total of lines 3a through e							
	Applied to underdistributions of prior years							
_ <u>h</u>	Applied to 2016 distributable amount							
<u>i</u> _	Carryover from 2011 not applied (see instructions)							
<u>_i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f		-					
<b>4</b> —	Distributions for 2016 from Section D, line 7. \$							
	Applied to underdistributions of prior years							
	Applied to 2016 distributable amount			<u> </u>				
<u>C</u>	Remainder Subtract lines 4a and 4b from 4.							
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions		0					
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions		U					
7	Excess distributions carryover to 2017 Add lines 3 <sub>j</sub> and 4c.	0		0				
8	Breakdown of line 7:							
а								
b	Excess from 2013							
С	Excess from 2014 .							
d	Excess from 2015							
е	Excess from 2016 .							

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b 3a, and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)
Part IV, Section A, Line 6 -
The Supported Organization works to preserve and enhance Jewish life. It addresses charitable, educational, religious, humanitarian,
health, cultural and social service needs of the Jewish community locally, nationally in Israel and throughtout the world.
In furtherance of that mission, the Supported Organization encourages families to establish supporting organizations in
partnership with it, in order to engage interested donors and succeeding generations in philanthropic pursuits and
enhance both the Jewish and general communities in keeping with the Jewish tradition of repairing the world
All grants are made to tax-exempt charitable organizations registered with the Internal Revenue Service.
Part IV, Section B, Line 2 -
Grants to organizations, other than the Supported Organization, are made at the discretion of the Board of the Supporting
Organization and are made in furtherance of the mission of the Supported Organization to support Jewish, cultural, educational
and social justice work.
•

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

#### **Political Campaign and Lobbying Activities**

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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

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

If the organization answered "Yes," 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
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

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

, (-	,,									
	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III								
	of organization			, , ,	ntification number					
	la & Anne Neuberger Fou			27-1040796						
Part		e organization is exempt und								
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")									
2	Political campaign activit	y expenditures (see instructions)			S					
3	Volunteer hours for politi	cal campaign activities (see instru	ictions)							
Part		e organization is exempt und								
1	Enter the amount of any	excise tax incurred by the organiz	ation under section	on 4955 ▶ \$	3					
2	Enter the amount of any	excise tax incurred by organization	n managers under	r section 4955 🔒 . 🕨 🥞	)					
3	If the organization incurre	ed a section 4955 tax, did it file Fo	orm 4720 for this y	vear?	. Yes No					
4a	Was a correction made?				Yes No					
b	If "Yes," describe in Part									
Part	I-C Complete if the	e organization is exempt und	der section 501(	c), except section 501	(c)(3).					
1	Enter the amount direct	ly expended by the filing organi	zation for section	527 exempt function						
				*						
2		filing organization's funds contri								
	•	vities		•						
3	· ·	expenditures. Add lines 1 and 2								
	line 17b			· · · · · · · · · · · · · · · · · · ·						
4		n file <b>Form 1120-POL</b> for this yea								
5		ses and employer identification nu								
		ents. For each organization listed,								
		ontributions received that were pro								
	as a separate segregated	fund or a political action committee	ee (PAC). If additio	nai space is needed, provi	de information in Part IV.					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-					
(1)					,					
(2)										
(3)										
(4)										
(5)			-							
(6)										

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

Schedule C (Form 990 or 990-EZ) 2016

Pa	art II-	section 501(h)).	is exempt under section 501(c)(3) and filed							
Ā	`	Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
В	Che	Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.								
		Limits on Lobby	ring Expenditures	(a) Filing	(b) Affiliated					
		(The term "expenditures" me	organization's totals	group totals						
-	1a T	otal lobbying expenditures to influence i	oublic opinion (grass roots lobbying)							
	b T	otal lobbying expenditures to influence a	a legislative body (direct lobbying)	61,000						
	c T	otal lobbying expenditures (add lines 1a	and 1b)	61,000						
	d C	other exempt purpose expenditures		2,681,000						
	e T	otal exempt purpose expenditures (add	lines 1c and 1d)	2,742,000						
	f L	obbying nontaxable amount. Enter th	ne amount from the following table in both							
	_ c	olumns.		287,100						
	lf	the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:							
	N	ot over \$500,000	20% of the amount on line 1e							
	0	ver \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.							
	0	ver \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.							
	0	ver \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000							
	0	ver \$17,000,000	\$1,000,000.							
	g G	irassroots nontaxable amount (enter 259	% of line 1f)	71,775						
	h S	ubtract line 1g from line 1a. If zero or les	ss, enter -0	0						
		ubtract line 1f from line 1c. If zero or les		0						
			on either line 1h or line 1i, did the organization	file Form 4720	☐ Yes ☐ No					
	re	eporting section 4911 tax for this year?		· · · · · · ·	☐ 162 ☐ MO					
		4-Ye:	ar 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.)

	Lobbyii	ng Expenditures D	uring 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	(e) Total
2a	Lobbying nontaxable amount	62,024	90,152	125,607	287,100	564,883
b	Lobbying ceiling amount (150% of line 2a, column (e))					847,325
C	Total lobbying expenditures	59,999	87,000	86,000	61,000	293,999
d	Grassroots nontaxable amount	15,506	22,538	31,402	71,775	141,221
е	Grassroots ceiling amount (150% of line 2d, column (e))					211,832
f	Grassroots lobbying expenditures	0	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2016

	(election under section 501(h)).	(a	9)		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>				
c	Media advertisements?	ļ				
d	Mailings to members, legislators, or the public?				·- <u>-</u> -	
е	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?	ļ				
j	Total. Add lines 1c through 1					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<b></b>				
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	)(5), (	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."  Dues, assessments and similar amounts from members				line :	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year	. }	2a			
b	Carryover from last year	.	_2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ying				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	_5			
Par	Supplemental Information le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	امنا میں	\. Do:	+ II A I	i	
	instructions), and Part II-B, line 1. Also, complete this part for any additional information.	up iisi	), rai	ι II-Α, I	1162 1	an
_ (000	monactions, and rate is by the transport and parties any additional information					
		·				
<b></b>						
<b></b>						
				<b></b>		<b></b> -
		<b>-</b>	<b>-</b>			

#### **SCHEDULE D** (Form 990)

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.

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	f the organization	T	Employer identification number
Yehud	a & Anne Neuberger Foundation, Inc.	_	27-1040796
Par	Organizations Maintaining Donor Adv Complete if the organization answered		ds or Accounts.
	Complete if the organization answered	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		, , , , , , , , , , , , , , , , , , ,
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene conferring impermissible private benefit?	efit of the donor or donor advisor, or fo	nt funds can be used or any other purpose
Par	Conservation Easements.		
	Complete if the organization answered		<del></del>
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recrea	·	• •
	Protection of natural habitat	☐ Preservation of	a certified historic structure
•	Preservation of open space  Complete lines 2a through 2d if the organization has been space.	ald a qualified conservation contribution	n in the form of a concentration
2	easement on the last day of the tax year.	eid a quaimed conservation contributio	Held at the End of the Tax Year
2			<del>  -  </del>
a b	Total acreage restricted by conservation easemen		
c	Number of conservation easements on a certified		
ď	Number of conservation easements included in		
	historic structure listed in the National Register .		,
3	Number of conservation easements modified, tran	sferred, released, extinguished, or term	ninated by the organization during the
	tax year ►		
4	Number of states where property subject to conse	Z=======	
5	Does the organization have a written policy re violations, and enforcement of the conservation ea	asements it holds?	Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing c	onservation easements during the year
7	Amount of expenses incurred in monitoring, inspectir ▶\$	ng, handling of violations, and enforcing o	conservation easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(II)?	e 2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text organization's accounting for conservation easements	of the footnote to the organization's fina ents.	ancial statements that describes the
Part	Organizations Maintaining Collection Complete if the organization answered		Other Similar Assets.
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the	r assets held for public exhibition, ed	ucation, or research in furtherance of
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar public service, provide the following amounts relative	SFAS 116 (ASC 958), to report in its r r assets held for public exhibition, editing to these items:	revenue statement and balance sheet ucation, or research in furtherance of
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		\$
2	following amounts required to be reported under S	i, nistorical treasures, or other similar SFAS 116 (ASC 958) relating to these ite	assets for financial gain, provide the ems:
a b	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		• \$
	,	· <u> </u>	· · · • •

Page	2

Part	III Organizations Maintaining	Collections of	Art, His	torical 1	reasures	, or O	ther Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of	her reco	rds, chec	k any of th	e follo	wing that are a s	ignificant use of its
à	☐ Public exhibition		d	□ Loan	or exchang	ge prog	rams	
b	Scholarly research		е	☐ Othe				
С	☐ Preservation for future generations	3						
4	Provide a description of the organizat		and expla	ain how t	hey further	the org	ganization's exen	npt purpose in Part
	XIII.		·		•	·		
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tr	easure	s, or other simila	ar
	assets to be sold to raise funds rather	than to be mainta	ained as j	part of the	e organizati	on's co	ollection? .	☐ Yes ☐ No
Part	IV Escrow and Custodial Arra	angements.						
	Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, line	e 9, or	reported an am	ount on Form
	990, Part X, line 21.						·	
1a	Is the organization an agent, trustee,	custodian or oth	er intern	nediary fo	or contribut	ions o	r other assets no	ot
	included on Form 990, Part X?							☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:			<del>-</del>
	,						Ai	mount
С	Beginning balance					10	;	
d	Additions during the year					10		
e	Distributions during the year					16		
f						11	<del></del>	
2a	Did the organization include an amour							?   Yes   No
	If "Yes," explain the arrangement in Pa			-			-	
Par				<u> </u>		<u> </u>	<u> </u>	<del></del>
	Complete if the organization	answered "Yes	" on For	m 990. F	Part IV. line	e 10.		
		(a) Current year		or year	(c) Two year		(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and			<del></del>				
_	losses							
d	Grants or scholarships						<del></del>	
e	Other expenditures for facilities and				- <del></del>			
	programs							
f	Administrative expenses				_ <del></del>			
g	End of year balance			-				<del>                                     </del>
2	Provide the estimated percentage of t	he current vear er	d balanc	e (line 1a	. column (a	)) held	as <sup>,</sup>	
a	Board designated or quasi-endowmer			- (	,	,,		
	Permanent endowment ▶	%	'					
	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and	2c should equal 1	00%					
3a	Are there endowment funds not in the	•		zation tha	at are held	and ad	ministered for the	Э
	organization by:	•	_					Yes No
	(i) unrelated organizations							3a(i)
	(iii) related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the related or							3b
4	Describe in Part XIII the intended uses	-	•					
Part	VI Land, Buildings, and Equip	ment.						
	Complete if the organization		" on For	m 990, F	Part IV, line	11a.	See Form 990,	Part X, line 10.
	Description of property	(a) Cost or ot			r other basis		Accumulated	(d) Book value
	· · · · · ·	(investm	ent)	(0	ther)	de	epreciation	
1a	Land				-			
b	Buildings							
C	Leasehold improvements							
d	Equipment							
e	Other							
Total	Add lines to through to (Column (d) m	ruet equal Form 0	On Part	Column	(R) line 10	lc l		

	Complete if the organization ar	iswered "Yes" on F	orm 990, Part IV, lin	e 11b. See Forn	n 990, Part X, line 12.
`	(a) Description of security or categ (including name of security)	ory	(b) Book value		thod of valuation d-of-year market value
1) Financia	derivatives				
2) Closely-l	held equity interests				
( <b>3)</b> Other					
(A) Investr	nent-Jewish Community Investment Fun	d	43,847	End-of-year mark	et value
	ment in Limited Partnership		127,185	End-of-year mark	et value
(C)					
(D)					
(E)					
(F)	F				
(G)					
(H)					
	(b) must equal Form 990, Part X, col (B) line 12)		171,032	<u> </u>	
Part VIII	Investments—Program Relat Complete if the organization ar		orm 990, Part IV, line	e 11c. See Form	n 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Me	thod of valuation l-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col (B) line 13.)	<b>-</b>			
Part IX	Other Assets.				
	Complete if the organization ar	iswered "Yes" on F	orm 990, Part IV, line	e 11d. See Form	990, Part X, line 15.
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X,	col. (B) line 15.)	<u> </u>	<u></u> ▶	
Part X	Other Liabilities. Complete if the organization ar line 25.	swered "Yes" on F	orm 990, Part IV, line	e 11e or 11f. Se	e Form 990, Part X,
	(a) Description of liability	(b) Book value	<del>,                                    </del>	<del></del>	
1.	(e) booonpron or nability	(D) DODK Value	-		
	ncome taxes		ı		
(1) Federal in	ncome taxes	<del></del>			
(1) Federal in (2)	ncome taxes				
(1) Federal in (2) (3)	ncome taxes				
(1) Federal in (2) (3) (4)	ncome taxes				
(1) Federal in (2) (3) (4) (5)	ncome taxes				
(1) Federal in (2) (3) (4) (5) (6)	ncome taxes				
(1) Federal in (2) (3) (4) (5) (6) (7)	ncome taxes				
(3) (4) (5) (6) (7) (8)	ncome taxes				
(1) Federal in (2) (3) (4) (5) (6) (7) (8) (9)					
(1) Federal in (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column (L))	b) must equal Form 990, Part X, col. (B) line 25.)		tnote to the organization	's financial stateme	ants that reports the

Part				Return.	
	Complete if the organization answered "Yes" on Form 990,			т	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a		_	
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c		7	
d	Other (Describe in Part XIII.)	2d		7	
е	Add lines 2a through 2d			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	
4	Amounts included on Form 990, Part VIII, line 12, 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		1	
C	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XII Reconciliation of Expenses per Audited Financial State	ments Wit	h Expenses pe	er Return	
_	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1	
C	Other losses			1	
d	Other (Describe in Part XIII.)			1 1	
e	Add lines 2a through 2d			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	
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 )			1	
C	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.) .     .		5	
Part 2	XIII Supplemental Information.			·	
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part				e 4, Part X, line
,					
. <b></b> -					
			·		
			······································		

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Yehuda & Anne Neuberger Foundation, Inc.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

2016	Open to Public

OMB No 1545-0047

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

Inspection Employer identification number 27-1040796

Schedule I (Form 990) (2016) °N □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance Operating support Operating support Operating support Operating support Operating support □ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (g) Description of noncash assistance (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 61,000 000,001 000.00 170,000 2,250,000 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) (p) EIN 53-0217164 46-4176398 52-0607957 20-5555166 52-6024192 (1) American Israel Public Affairs Committee (4) The Women's Network for Single Parents 101 W Mt Royal Ave Balto MD 21201 101 W Mt Royal Ave Balto MD 21201 1 (a) Name and address of organization (5) The Associated Jewish Charities 251 H Street NW Washington DC 20001 204 Avenue J Brooklyn, NY 11230 3603 Ouentin Rd Brooklyn NY 11234 (3) The Associated JCFB (2) Mercava Part I Part II (12) 6 5 £ 9 (7) 8

Schedule I (Form 990) (2016)

Schedule I (Form 990) (2016) (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) The Foundation will request and receive periodic reports and updates from the grantees regarding how grants are utilized, and takes such (d) Amount of noncash assistance Grants are reviewed to ensure that they are permissible and in accord with applicable laws and regulations. (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients information into account in considering future grant awards (a) Type of grant or assistance Part IV Part III 2 2 ဖ

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

Compensation Information

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

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

► Attach to Form 990.

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

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	da & Anne Neuberger Foundation, Inc. 27-1040796			
Part	I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed 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			1
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			ļ
	☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	-		
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?			
		2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval 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		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		<u>X</u>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III			- <u> </u>
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. 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	į		
а	The organization?	5a		X
b	Any related organization?	5b	_	X
	If "Yes" on line 5a or 5b, describe in Part III			
6	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	Any related organization?	6a		X
-	If "Yes" on line 6a or 6b, describe in Part III	90		X
-				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III	8		v
		<del> </del>	-+	<u>X</u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			

Schedule J (Form 990) 2016

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

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

150,000 (F) Compensation in column (B) reported as deferred on prior Form 990 Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual 894,185 (E) Total of columns (B)(i)-(D) 31,456 (D) Nontaxable benefits 60,600 (C) Retirement and other deferred compensation 253,001 (iii) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. 75,000 (ii) Bonus & incentive compensation 474,128 (ı) Base compensation  $\in$ EE  $\equiv$ ≘≘ E € €€  $\in$  $\Xi$ ≘≘  $\in$  $\equiv$ E €  $\equiv$ ≘ ≘  $\equiv$ (A) Name and Title 1 Marc B. Terrill ~ S 9 œ 6 9 7 5 4 5 9

Schedule J (Form 990) 2016

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

### Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization	Employer identification number									
Yehuda & Anne Neuberger Foundation, Inc 27-1040796										
Form 990 Part VI, Section A,										
Line 2 - There are family relationships among the Donor Members and Directors. Yehuda Neuberger and	Anne Neuberger have a									
family relationship										
Line 6 - The organization has two classes of members, a Public Member-The Associated Jewish Commun	nty Federation of Baltimore, Inc. and									
Donor Members consisting of Yehuda Neuberger and Anne Neuberger										
Line 7a - The Members appoint the Board of Directors. The Public Member appoints the majority and the	Donor Members									
appoint the remainder.										
Line 7b - Amendments to the Bylaws are subject to change or rescission by the Members before they are ac	dopted									
Line 11a - The Form 990 and supporting schedules are distributed to the officers and directors upon compl	etion for									
review prior to filing										
Line 12c - The supported organization monitors and enforces the potential of any conflict of interests by										
regularly reviewing the Board of Directors, its actions and the investment of assets to ensure that it complies										
with the conflict of interest policy.										
Line 15 - Marc B Terrill participates in a nonqualified deferred compensation plan \$218,648 vested and vested	was paid during the year									
This amount is included in Form 990, Part VIII, Column E and Schedule J, Part II, Column Biii Fifty thousand	and dollars									
was deferred and is included on Form 990, Part VII, Column F and Schedule J, Part II, Column C. A new five	ve-year contract									
was executed for Marc B. Terrill beginning January 1, 2013. The terms and conditions of the deferred comp	ensation plan									
are outlined in the contract with The Associated										
Line 19 - The organization makes its governing documents and financial statements available to the public	upon request									
	·									

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Yehuda & Anne Neuberger Foundation, Inc

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

Open to Public OMB No 1545-0047 2016

Employer identification number Inspection 27-1040796

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity å Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Yes (f)
Direct controlling
entity (e) End-of-year assets N/A (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. ~ (d) Exempt Code section (c)
Legal domicile (state or foreign country) 501(c)(3) (c) Legal domicile (state or foreign country) Maryland (b) Primary activity Exempt Organization (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) The Associated. Jewish Community Federation of Baltimore, Inc. (a) Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization 101 W. Mt Royal Avenue Baltimore, MD 21201 Part I Part II Ð 2 ල € 9 9 € © 9 3 ත 0

Schedule R (Form 990) 2016

(i) Section 512(b)(13) controlled Percentage ownership ĝ ;ङ 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. Yes Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. (i) General or managing Yes No partner? (h) Percentage ownership (i)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) (g) Share of end-of-year assets (h)
Disproportionate
allocations? ŝ (f) Share of total income Yes (g) Share of end-of-(C corp, S corp, or trust) (f) Share of total income (d)
| Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from tax under sections 512-514) (c)
Legal domicile
(state or foreign country) (d)

Direct controlling entity (b) Primary activity (c) Legal domicile (state or foreign country) (b) Primary activity (a)
Name, address, and EIN of related organization (a)
Name, address, and EIN of related organization N/A (1) N/A Part III Part IV Ξ 8 2 ල € (5) 9 2 € 3 9 8 <u>ල</u>

Schedule R (Form 990) 2016

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Schedule R (Form 990) 2016

Part V Transactio

1		Schodule D (Earm 900) 201			
volved	mount in	(d) Method of determining amount involved	(c) Amount involved	(b) Transaction type (a-s)	(a) Name of related organization
olds.	thresh	nships and transaction	luding covered relatio	omplete this line, inc	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.
(×	- 2				Other transfer of cash or property from related organization(s)
<b>&gt;</b>	+				Other transfar of cash or property to related organization(s)
×	4				Reimbursement paid by related organization(s) for expenses
×	<b>1</b>				Reimbursement paid to related organization(s) for expenses
-	<u>و</u>				Sharing of paid employees with related organization(s)
×	두				Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
×	1 E				Performance of services or membership or fundraising solicitations by related organization(s)
×	=				Performance of services or membership or fundraising solicitations for related organization(s)
<u> </u>	¥				l ease of facilities, equipment, or other assets from related organization(s)
××	1;		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Exchange of assets with related organization(s)  Lease of facilities, equipment, or other assets to related organization(s)
×	드				Purchase of assets from related organization(s)
×	1g				Sale of assets to related organization(s)
×	<b>1</b>				Dividends from related organization(s)
			,		
×	1e				
×	P				Loans or loan guarantees to or for related organization(s)
×	10				Gift, grant, or capital contribution from related organization(s)
	1b X				Gift, grant, or capital contribution to related organization(s)
×	1a				Receipt of (i) interest, (ii) annurties, (iii) royalties, or (iv) rent from a controlled entity
·  -	-	Is II–IV?	nizations listed in Par	or more related orga	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?
Yes No	Ye	]			Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

/ Page 4

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 assêts, or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(k) Percentage ownership																		Schedule R (Form 990) 2016
(I) General or managing partner?	Yes No	-																dule R (Fc
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)																		Sche
) ns?	Yes No																	
Disp	٣																	
(g) Share of end-of-year assets		_																
(f) Share of total income				:														
(e) Are all partners section 501(c)(3) organizations?	Yes No																	
Predominant An income (related, unrelated, excluded from tax under order control of 12,514)											•							
(c) Legal domicile (state or foreign country)																		
(b) Primary activity																		
(a) Name, address, and EIN of entity		(1)	(2)	(3)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	