			Return of (Drganization E	xempt F	rom In	come Tax		OMB No. 15	545-0047
Forn	g	90	Under section 501(c), 52	7, or 4947(a)(1) of the Int	ernal Revenu	e Code (ex	cept private founda	ations)	20	14
		•••		Social Security numbers		-		,	Open to	Public
		of the Treasury enue Service	Information a	about Form 990 and its ir	nstructions is a	at www.irs.g	ov/form990.		Inspect	ion
A F	or th	e 2014 ca	lendar year, or tax year begi	nning 07/	01, 2014, a	nd ending		06/30) , 20 ₁₅	
		C N	ame of organization THE JEWISI	H FEDERATION OF	GREATER		D Employer id	dentificatior	n number	
B Cł	neck if ap	W	ASHINGTON, INC.							
	Addre chang		bing Business As				53-021	2445		
	Name	e change N	umber and street (or P.O. box if mail is	not delivered to street address	s) Ro	oom/suite	E Telephone	number		
	Initial		101 EXECUTIVE BOULEV	,			(301) 23	30-7200)	
	Termi	inated Ci	ty or town, state or province, country,	and ZIP or foreign postal code						
	Amen return		ORTH BETHESDA, MD 20	852			G Gross recei	pts \$	66,002	,482.
	Applic pendi	cation F Na ing	ame and address of principal officer:	STEVEN A. RAK	ITT		H(a) Is this a gro subordinate		Yes	X No
		6	101 EXECUTIVE BOULEV	ARD NORTH BETHES	SDA, MD 2	0852-48			Yes	No
<u> </u>	Tax-ex	empt status:	X 501(c)(3) 501(c) () ┥ (insert no.)	4947(a)(1) or	527	If "No," atta	ach a list. (see	instructions)	
J	Websi	ite: 🕨 WWV	I.SHALOMDC.ORG			_	H(c) Group exer	nption number		
κ	Form o	of organizatio	n: X Corporation Trust	Association Other		L Year of fo	ormation: 1948 M	State of leg	gal domicile:	MD
Pa	art I	Summa	ary							
	1	Briefly des	cribe the organization's mission	or most significant activities	: COMMUNI	TY BUIL	DER, FUNDRAI	ISER, A	ND SAF	ETY
e		NET FO	R THE JEWISH COMMUNI	TY OF GREATER WA	SHINGTON	•				
and										
Governance	2	Check this	box box if the organization of the organizat	discontinued its operation:	s or disposed c	of more than	25% of its net asse	 ts.		
G	3	Number of	voting members of the governing	body (Part VI, line 1a)				3		123.
			independent voting members of					4		122.
Activities &			per of individuals employed in cal					5		100.
tivi			per of volunteers (estimate if neces					6	8	,720.
Ac	- 7a	Total unrel	ated business revenue from Part	/III. column (C). line 12				7a		5,663.
			ted business taxable income from					7b		6,795.
						· · · · · · ·	Prior Year	1	Current Y	
	8	Contributio	ons and grants (Part VIII, line 1h)				30,460,0	38.	34,222	2.779.
Revenue	9	Program s	ervice revenue (Part VIII, line 2g)		COPY F	OR		0		0
evel	10	Investmen	ervice revenue (Part VIII, line 2g) t income (Part VIII, column (A), lin	es 3 4 and 7d)	PUBLIC INSP		4,481,3	17.	5.09	3,970.
Ř			nue (Part VIII, column (A), lines 5				483,1			3,053.
			nue - add lines 8 through 11 (mus				35,424,4		39,859	
			d similar amounts paid (Part IX, co				24,437,6		19,135	
			aid to or for members (Part IX, colu				21/10//0	0	17,100	0
			ther compensation, employee ber				6,728,3	79.	6,600	0,802.
Expenses			al fundraising fees (Part IX, colum				50,6			9,304.
per	h	Total fund	raising expenses (Part IX, column	(D) line 25) \blacktriangleright 4.1	207.803	••••+				
Ĕ	17		enses (Part IX, column (A), lines 1	(B), IIIC 20)		-	4,002,2	55.	3.94	1,122.
			nses. Add lines 13-17 (must equa				35,218,8		29,736	
			ess expenses. Subtract line 18 fro				205,6		10,123	
es	10	Revenue k					Beginning of Current		End of Yea	
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)			-	216,125,3		221,836	
Ass Bal			ties (Part X, line 26)				74,700,7		74,728	
let /			or fund balances. Subtract line 2				141,424,5		147,10	
	rt II		ure Block				111,121,5		117,10	,175.
		•	jury, I declare that I have examined the	nis return including accompa	nvina schedules	and stateme	nts and to the best of	of my know	edge and b	elief it is
true	e, corre	ect, and comp	blete. Declaration of preparer (other that	n officer) is based on all inform	nation of which	preparer has a	any knowledge.		lougo ana b	
Sig	n	Signa	ature of officer				Date			
Her		-								
			VEN A. RAKITT or print name and title		CEO & E2	AEC VP				
			preparer's name	Preparer's signature		Date		if PTIN		
Paid	I			Rha	the Sul con	5/10/2	2016 Check self-emplo	J"		,
Prep	oarer		SORRELLS						0001737	
Use	Only	Firm's nam					Firm's EIN 🕨	13-538		
	46 - 1	Firm's addr	ess > 8401 GREENSBORO DRIVE,	SUITE 800 MCLEAN, VA 2	`		Phone no.		3-0600	
			this return with the preparer show				<u></u>	[2	Yes	
⊢or	Pape	rwork Redi	uction Act Notice, see the separa	te instructions.					Form 99	u (2014)

_	n 990 (2014)	Page
Pa	art III Statement of Program Service Accomplishments	
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	•
	ATTACHMENT 1	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ? Yes," describe these new services on Schedule O.	X
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	37
	services? Yes If "Yes," describe these changes on Schedule O.	X
4	Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 19,135,084. including grants of \$ 19,135,084.) (Revenue \$	
	ALLOCATION TO BENIFICIARY AGENCIES: THE JEWISH FEDERATION OF	
	GREATER WASHINGTON SUPPORTS 33 LOCAL AGENCIES, 12 NATIONAL	
	ORGANIZATIONS, 4 OVERSEAS PARTNERS (THROUGH THEIR U.S. NONPROFIT	
	AFFILIATE) AND MORE THAN 60 CONGREGATIONS THAT CARE FOR THOSE IN	
	NEED, DEEPEN PEOPLE'S ENGAGEMENT IN JEWISH LIFE AND CONNECT JEWS LOCALLY, IN ISRAEL AND AROUND THE WORLD. THE JEWISH FEDERATION	
	TAKES SERIOUSLY ITS RESPOSNSIBILITY TO CARE FOR THE VULNERABLE IN	
	OUR COMMUNITY AND AROUND THE WORLD. (SEE SCHEDULE O FOR	
	CONTINUATION)	
b	(Code:) (Expenses \$including grants of \$) (Revenue \$ COMMUNITY OUTREACH: THE JEWISH FEDERATION OF GREATER WASHINGTON STRIVES TO MAKE THE	
	JOYS OF JEWISH LIFE ACCESSIBLE TO EVERYONE, SEAMLESSLY CONNECTING	
	THE DIVERSE POPULATION THAT MAKES UP THE JEWISH COMMUNITY OF	
	GREATER WASHINGTON. REGARDLESS OF A PERSON'S LEVEL OF OBSERVANCE,	
	INTERESTS, AGE, SEXUAL ORIENTATION OR GEOGRAPHY, THERE ARE	
	COUNTLESS WAYS ONE CAN EXPEREINCE AND ENJOY JEWISH CULTURE AND	
	TRADITION IN OUR COMMUNITY. (SEE SCHEDULE O FOR CONTINUATION)	
10	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
+C		
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
SA	Total program service expenses ► 22,602,990. 000 Form 99	0 (20
20 1	.000 Form 3 3	

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			F	Page 3
Part	V Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	NO
	complete Schedule A	1	х	
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? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		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	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		37
•	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		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	0		
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
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	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	44.5		v
h	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		X
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		Х
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	4.4.6		v
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
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		Х
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	Х	
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
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 9	90 (2014)		F	Page 4
Part	IV Checklist of Required Schedules (continued)			
			Yes	No
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		v	
	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	240	х	
	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b	x X	
b		240	Λ	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		х
ا م	to defease any tax-exempt bonds?	240 24d		X
d 25 a	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	24u		
25a		25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	254		
D D	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		Х
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	Х	
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
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	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	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		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		v	
	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,	24	v	
	or IV, and Part V, line 1	34	X	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled antity within the magning of section 512(b)(12)? If "Yes" complete Schedule P. Part V line 2	35b		
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	550		
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		- 22
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI.	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	х	

Page 5

Par				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	- No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 87		163	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return _ 2a 100			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2-	v	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3a 3b	X X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	55		
τu	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ATTACHMENT 2			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
0a	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			
	and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70	x	
Ь	required to file Form 8282?	7c		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	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		X
9	Sponsoring organizations maintaining donor advised funds.	0-		v
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		X X
10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b]		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
р 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b] Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
-	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	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			
	the organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	1

Form	990 (2014) THE JEWISH FEDERATION OF GREATER	53-0212	445	F	Page 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through	7b below,	and	for a	"No
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sc	hedule O. S	See in	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	tion 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	123			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent 1b	122			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	ship with			
	any other officer, director, trustee, or key employee?	-	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under t				
	supervision of officers, directors, or trustees, or key employees to a management company or other pers		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets		5		Х
6	Did the organization have members or stockholders?		6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?		7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) n	nembers,			
	stockholders, or persons other than the governing body?		7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertake	n during			
	the year by the following:				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal	Revenue	Coae		
		Г		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such	-			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purpose		10b	v	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	e form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40-	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	· · · · · · ·	12a	Λ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that co	-	4.04	Х	
	rise to conflicts?	· · · · · · ·	12b	А	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy?		122	Х	
40	describe in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	21	
15	Did the process for determining compensation of the following persons include a review and app	- 1			
-	independent persons, comparability data, and contemporaneous substantiation of the deliberation and of		15a	х	
a L	The organization's CEO, Executive Director, or top management official	· · · · · · ·	15a 15b		х
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	•••••	150		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	ngomont			
104	with a taxable entity during the year?	•	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to eva	· · · · · ·	Tou		
Ň	participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	organization's exempt status with respect to such arrangements?		16b		
Sect	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright _DC, MD, VA,				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section	501(:)(<u>3</u>)e	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			.,,0,0	y)
	X Own website Another's website X Upon request Other (explain in Schedule	O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	nflict of inte	rest	policy	, and
. –	financial statements available to the public during the tax year.				,

State the name, address, and telephone number of the person who possesses the organization's books and records: ISABELLA YUSIMOVA 6101 EXECUTIVE BOULEVARD, SUITE 100 NORTH BETHESDA, MD 2 301-230-7200 20

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53-0212445

Page 7

	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Independent Contractors	and
	Check if Schedule O contains a response or note to any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
1a Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or with	in the

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.

(A) Name and Title	(B) Average hours per week (list any	box,	unles	s pe	ition more rson	e than c is both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated 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)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1)NISSAN_ANTINE	.70									
MEMBER	0	X						C	0	0
_(2)ADAM_AUGUST MEMBER	.70	x						C	0	0
(3) EMILY_BENOVITZ	.70	Λ						U U	0	0
MEMBER		x						C	0	0
(4)PAUL S. BERGER	2.00	- 21							0	0
COUNSEL	0	x		х				C	0	0
(5)JOSHUA B. BERNSTEIN	2.00									
VICE PRESIDENT AT LARGE	0	Х		Х				0	0	0
_(6)MICHELE HYMER BLITZ	.70									
MEMBER	0	X						C	0	0
(7)A. ROBERT BLOOM	.70	37								0
MEMBER	.70	Х						C	0	0
_(8)SAMUEL_B. BOXERMAN MEMBER		x						C	0	0
(9)NANCI S. BRAMSON	.70	~							0	0
MEMBER		x						C	0	0
(10) JOEL BRESLAU	2.00									°
PAST PRESIDENT	0	x		х				C	0	0
(11) FAY-ANN BRODIE	.70									
MEMBER	0	x						C	0	0
(12)SAMUEL BRYLAWSKI	.70									
MEMBER	0	Х						C	0	0
(13) BRADLEY A. BUSLIK MEMBER	.70	x						C	0	0
(14) DAVID J. BUTLER	2.00									
PAST PRESIDENT	0	Х		Х				0	0	0

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	(A)	(B)			(0	C)			(D)	(E)		(F)	
Na	ame and title	Average			Pos				Reportable	Reportable		Estimated	t
		hours per	`				e than c		compensation	compensation from	1	amount o	of
		week (list any					is both or/trust		from	related		other	
		hours for related	2 5			_		<u> </u>	the	organizations		mpensati from the	
		organizations	divi	stitu	Officer	Key employee	nplc	Forme	organization (W-2/1099-MISC)	(W-2/1099-MISC)		rganizatio	
		below dotted	dua	Jtior	Ť	mpl	st c	P 4				and relate	
		line)	T tr	lal t		oye	mp				or	rganizatio	ns
			Individual trustee or director	Institutional trustee			bens						
				e			Highest compensated employee						
15) JONATHAN CH	HARNOFF	.70											
MEMBER		0	X						0	0			
16) JEFF COHEN		.70											
MEMBER		0	X						0	0			
17) MARCELLA CO	OHEN	.70	-						_				
MEMBER		0	X						0	0			
18) MORRIS COH	EN	.70											
MEMBER		0	X						0	0			
19) ROSE COHEN		.70											
MEMBER		0	X						0	0			
20) SCOTT M. CO		.70	v							0			
MEMBER 21) JASON M. CO		.70	X						0	0			
MEMBER	JNWA1	. /0	x						0	0			
22) LAURA K. CU	וייז.דף	.70							0	0			
MEMBER		0	x						0	0			
23) EVA MALKA I	DAVIS	2.00											
	DENT FOR MARKETING	0	x		х				0	0			
24) FRED DIAMON		.70											
MEMBER		0	x						0	0			
25) JEFFREY S.	DISTENFELD	.70											
MEMBER		0	X						0	0			
1b Sub-total									0	0			
	inuation sheets to Part VII, S	ection A		•••	• • •	•••	•••		1,362,450.	0		78,8	379
	1b and 1c)	-							1,362,450.	0		78,8	379
2 Total number of	individuals (including but not ensation from the organization	limited to t	hose	liste 5	d al	bove	e) who	o re	ceived more than	\$100,000 of			
				<u> </u>								Yes	N
2 Did the event	-otion list one former off	- المصالح م		<i>k</i>		~ '	-					Tes	
	zation list any former offic a 1a? If "Yes," complete Sched										3		Σ
	ש ומ: וו וכט, טטוווטופופ טטוופטו	นเธิมาบกรับเ	วกากน	iviul	uai						1 3	1	1 4

individual.
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

	(A) Name and business address	(B) Description of services	(C) Compensation
AJ	TACHMENT 3		
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► 5	e listed above) who received	

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5

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(A) Name and title	(B) Average hours per week (list any hours for	box, office	not ch unless er and	s per a di	tion more th son is irector/	ian one both an trustee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensatio from the		f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org an	anizatio d related anizatior	b
) NANCY DUBER MEMBER	.70	X					0	ſ			-
) AMY DWECK	.70										
MEMBER) PETER FEDEROWICZ	.70	X						(
MEMBER) ANNE FEINBERG	0.70	Х		-			C	С			
MEMBER	0	Х					С	0			
) DIANE S. FEINBERG PAST PRESIDENT	2.00	х		x			C	C			
) KEVIN E. FISHKIND MEMBER	.70	Х					C	C			
MICHAEL R. FLYER	.70	x					0	(
MEMBER) MICHAEL FRIEDMAN	.70										
MEMBER	.70	Х			_		C	C			
MEMBER) MICHAEL C. GELMAN	0 2.00	Х					C	C			
PAST PRESIDENT	0	Х		х			C	C			
) SUSAN R. GELMAN PAST PRESIDENT	2.00	х		x			C	C			
 b Sub-total c Total from continuation sheets to Par d Total (add lines 1b and 1c) Total number of individuals (including b reportable compensation from the organism 	out not limited to the			d ab	ove)	who re	eceived more than	\$100,000 of			
· ·										Yes	N
Did the organization list any forme employee on line 1a? If "Yes," complete									3		2
For any individual listed on line 1a, organization and related organization	ons greater than	\$15	0,00)0?	lf	"Yes,"	complete Schedu	le J for such			
<i>individual</i> Did any person listed on line 1a reco	eive or accrue cor	mpen	satio	n f	rom	any un	related organization	on or individual	4	X	
for services rendered to the organizatio ection B. Independent Contractors	n? If "Yes," complet	te Sch	nedul	le J	for s	ich pei	rson	<u></u>	5		2
Complete this table for your five higher compensation from the organization. F year.											
(A) Name and busi							(B) Description of se	ervices	(C) Compen		

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Port VII	Santian	۸	Off

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and ⊦	ligl	hest Compensat	ed Emplo	yees (co	ntinued)
(A)	(B)			((C)			(D)	(E)		(F)
Name and title	Average hours per week (list any	box,	unles	heck ss pe	erson	e than o is both	an	Reportable compensation from	Reporta compensati relate	on from	Estimated amount of other
	hours for related organizations below dotted line)	offic Individual trustee or director	a Institutional trustee	d Officer	tirect Key employee	or/truste Highest compensated employee	e) Former	- the organization (W-2/1099-MISC)	organiza (W-2/1099		compensation from the organization and related organizations
37) RACHEL GERROL	.70										
MEMBER	0	X						0		0	
8) CATHY GILDENHORN	2.00										
PRESIDENTIAL APPOINTEE	0	Х		Х				0		0	
9) JOSEPH B. GILDENHORN	2.00										
PAST PRESIDENT	0	Х		Х				0		0	
0) RONALD R. GLANCZ	2.00										
VP FINANCE & TREASURER	0	Х		Х				0		0	
1) SOL GLASNER	.70										
MEMBER	0	Х						0		0	
2) CAROL I. GORDON	2.00										
PRESIDENTIAL APPOINTEE	0	Х		Х				0		0	
3) RALPH E. GRUNEWALD	.70										
MEMBER	0	Х						0		0	
4) MARCI HANDLER	.70										
MEMBER	0	Х						0		0	
5) RICH HANDLOFF	.70										
MEMBER	0	Х						0		0	
6) GREG HARRIS	.70										
MEMBER	0	Х						0		0	
7) ARNIE HILLER	.70										
MEMBER	0	Х						0		0	
 1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) 2 Total number of individuals (including but not reportable compensation from the organization 	limited to t	hose			bove	e) who	re	ceived more than	\$100,000	of	
 3 Did the organization list any former officemployee on line 1a? If "Yes," complete Sched 	cer, directo	or, or	tru								Yes N 3 X
4 For any individual listed on line 1a, is the organization and related organizations granizations of individual.	eater than	\$15	50,0	00?	P If	"Yes	,"	complete Schedu	le J for	such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If " Section B. Independent Contractors											5 2
				1					11	000 . (
 Complete this table for your five highest con compensation from the organization. Report year. 											s tax
(A) Name and business ad	dress							(B) Description of se	ervices	Co	(C) mpensation

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Part VII Section A. Officers, Directors, 1 (A) Name and title	(B) Average			(C Posi	;) ition		(D) Reportable	(E) Reportal	ble	(F) Estimat	
	hours per week (list any hours for related organizations below dotted line)	box,	unles	s per ladi	rson irect	e than on is both a or/truste Highest compensated employee	from	compensatic related organizat (W-2/1099-	l ons	amouni other compens from th organiza and rela organizal	ation ne ition ited
8) EMILY HOFMANN MEMBER	.70	x					()	0		
9) KERRY L. IRIS MEMBER	.70	x							0		
0) RONALD D. KABRAN	.70							-			
MEMBER 1) BRUCE KAPLAN	.70	X					(-	0		
MEMBER 2) EDWARD H. KAPLAN	2.00	X					(0		
PAST PRESIDENT 3) IRENE R. KAPLAN	0	X		X			(0		
PAST PRESIDENT 4) LESLIE A. KAPLAN	0	x		X			(0	0		
MEMBER	0	x					(2	0		
5) SAMUEL G. KAPLAN MEMBER	0	x					(2	0		
6) JULIE E. KASS MEMBER	.70	x					(D	0		
7) SHERRY K. KASWELL MEMBER	.70	x						D	0		
8) SHELDON H. KLEIN MEMBER	.70	x)	0		
 1b Sub-total c Total from continuation sheets to Part VII, d Total (add lines 1b and 1c) 2 Total number of individuals (including but not shown in the shown in the	ot limited to t	hose	liste			e) who	received more than	\$100,000 c	of		
 reportable compensation from the organizat Did the organization list any former of employee on line 1a? If "Yes," complete Sche 	ficer, directo		tru							Ye 3	s N
For any individual listed on line 1a, is the organization and related organizations individual.	greater than	\$15	50,00	00?	lf	"Yes,	and other compen <i>complete</i> Schedu	sation from . <i>le J for s</i>	the such	4 X	
5 Did any person listed on line 1a receive of for services rendered to the organization? If										5	2
Section B. Independent Contractors							di	- 11 #400	000		
 Complete this table for your five highest co compensation from the organization. Repor year. 											
(A) Name and business a	address						(B) Description of s	ervices	Co	(C) ompensatio	n

	(A)	(B)			10	C)			(D)	(E)	(F)	
	Name and title	Average hours per week (list any hours for	box, office	unles	Pos heck ss pe	ition more rson	e than c is both or/trust	an	Reportable compensation from the	Reportable compensation from related organizations	Estima amoun othe compens	ted t of r
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from th organiza and rela organiza	he ation ated
59)_LAWRENCE_PKLINE MEMBER	.70 0	х						0	0		
60) WILLIAM M. KREISBERG	2.00	37		37							
61	VP COMM & GLOBAL IMPACT-LOCAL) JOCELYN B. KRIFCHER	.70	X		Х				0	0		
	MEMBER	0	Х						0	0		
62	ALLEN KRONSTADT	.70	x						0	0		
63	MEMBER) ROCHELLE KUPFER	2.00							0	0		
	VP OF WOMAN'S PHILANTHROPY	0	Х		Х				0	0		
64) STUART S. KURLANDER	2.00										
65	PAST PRESIDENT) ARTHUR N. LERNER	.70	X		Х				0	0		
	MEMBER	0	х						0	0		
66) STUART H. LESSANS	.70										
	MEMBER	0	Х						0	0		
67) HENRY D. LEVINE	.70	37									
	MEMBER	0	X						0	0		
68	DESTREME UNITED TENTSU ENDON	2.00	x		х				0	0		
60	PRESIDENT, UNITED JEWISH ENDOW) LIZA LEVY	2.00							0	0		
	PRESIDENT	0	х		х				0	0		
	b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	<u></u>										
2	Total number of individuals (including but not l reportable compensation from the organizatior			liste 5	d al	DOVe	e) who	o re	ceived more than	\$100,000 of		
_											Ye	s N
3	Did the organization list any former offic employee on line 1a? <i>If "Yes," complete Schedu</i>										3	2
4	For any individual listed on line 1a, is the s	sum of rep	ortab	ole c	com	pen	satio	n ai	nd other compens	sation from the		
-	organization and related organizations gre											

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
 2 Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► 	e listed above) who received	

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	(A) Name and title	(B) Average hours per week (list any hours for	box, office	not ch unles er and	s pe lad	ition more rson irect	e than on is both a or/truste	in e)	(D) Reportable compensation from the	(E) Reportab compensation related organizatio	n from	am com	(F) stimated nount of other pensation	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-N	MISC)	orga and	om the anizatio d related anizatior	ł
70)	MARK K. LEZELL MEMBER	.70	x						C		0			
71)	PHILIP N. MARGOLIUS PAST PRESIDENT	2.00	X		х				C		0			
72)	DAVID MASSARIK MEMBER	.70	X						C		0			
73)	LOUIS MAYBERG MEMBER	.70	X						C		0			
(4)	MANETTE MAYBERG MEMBER	.70	X						C		0			
/5)	ALAN L. MELTZER MEMBER	.70	x						C		0			
6)	BENJAMIN MILAKOFSKY	.70	x						C		0			
7)	LYNN W. MORGAN MEMBER	.70	Х						C		0			
8)	MARCIA I. NUSGART MEMBER	.700	X						C		0			
9)	RONALD A. PAUL, M.D. MEMBER	.700	Х						C		0			
30)	CONSTANCE PESACHOWITZ MEMBER	.70	Х						C		0			
С	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)					• • •	· · ·							
2	Total number of individuals (including but not reportable compensation from the organization		hose (d at	oove	e) who	reo	ceived more than	\$100,000 of	f			
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Sched											3	Yes	N
4	For any individual listed on line 1a, is the organization and related organizations groups of the second se	sum of rep eater than	ortab \$15	le c 0,00	om 00?	pen <i>If</i>	sation "Yes,	an "c	nd other compens complete Schedu	sation from	the		37	
5	individual Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue col	mpen	satio	on f	rom	any	unr	elated organization			4	X	_
Se	ction B. Independent Contractors	es, complet		ieuu	10 0	101	Such		5017	<u></u>	••	J		
1	Complete this table for your five highest com compensation from the organization. Report of year.													
	(A) Name and business add	Iress							(B) Description of se	ervices	Со	(C) ompens		
														_

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	(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles er and	Pos heck ss pe d a d	erson lirect	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation related organization	from s	(F) Estima amoun othe compens	ted t of r sation
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MI	SC)	from t organiza and rela organiza	ation ated
	AEL PLOSTOCK	2.00											
	F YOUNG LEADERSHIP	0	X		Х				C		0		
	E POSLOSKY	.70	x								0		
MEMB 3) KIM		.70	Λ								0		
MEMB		. /0	x								0		
	J. RASKIN	.70											
MEMB		0	x						0		0		
	EN J. ROSENBAUM	.70											
MEMB		0	x						C		0		
5) MERY	L B. ROSENBERG	2.00											
VP L	EADERSHIP & VOLUNTEER DEVE	0	X		Х				C		0		
7) WEND	Y S. RUDOLPH	2.00											
VP C	OMMUNITY & GLOBAL IMPACT	0	X		Х				C		0		
8) JEFF	ERY S. RUM	.70											
MEMB	ER	0	Х						C		0		
9) DEBO	RAH RATNER SALZBERG	.70											
MEMB	ER	0	Х						C)	0		
0) RAAN	AN SHAMES	.70	-										
MEMB		0	X						C		0		
	N N. SHANKMAN	.70	-										
MEMB	ER	0	Х						0		0		
b Sub-to													
	rom continuation sheets to Part VII, S	=				• •							
	add lines 1b and 1c)					••	•••						
	umber of individuals (including but not ble compensation from the organization			-	d al	bove	e) who	o re	ceived more than	\$100,000 of			
Теропа	the compensation nom the organization			5								Va	s I
				4					launa an binhaa		. [Te	5 1
	e organization list any former offic vee on line 1a? If "Yes," complete Schedu											3	
												J	
For an organiz	y individual listed on line 1a, is the s zation and related organizations gre ual	eater than	\$15	50,0	00?	lf If	"Yes	s," (nd other compension complete Schedu	sation from the J for suc	e :h	4 X	
individ	y person listed on line 1a receive or								related organizati	on or individu			
	vices rendered to the organization? If "Ye											5	
5 Did an		,				2.					- 1	- 1	
5 Did an for serv	Independent Contractors												
5 Did an for serv Section B. Comple compe	¥											tax	
Did an for serv Section B.	Independent Contractors ete this table for your five highest com											tax (C)	

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(A) Name and title	(B) Average hours per week (list any hours for	box, office	not ch unless er and	s per a di	ition more rson irecte	than or is both a or/truste φ_τ	an :e)	(D) Reportable compensation from the	(E) Reporta compensati relate organiza	on from ed tions	am com	(F) timated tount of other pensation	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099	-MISC)	orga and	anizatio d related anizatior	b
2) JESSICA SHER MEMBER	.70	X						0		0			
B) JANE E. SHICHMAN MEMBER	.70	x						0		0			
b) BEN SHLESINGER	.70	A					_	0					
MEMBER	0	Х						0		0			
5) GREGORY SHRON MEMBER	.70	Х						0		0			
5) MATTHEW H. SIMON	2.00						_	0					
PAST PRESIDENT	0	Х		Х				0		0			
/) MARC F. SOLOMON MEMBER	.70	х						0		0			
3) JONATHAN STAHL	.70	A					_	0					
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) JOSHUA STEVENS	.70	х						0		0			
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) STEVEN D. STONE	.70	37											
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 b Sub-total c Total from continuation sheets to Pare d Total (add lines 1b and 1c) Total number of individuals (including line) 			listeo	d ab	DOVE	e) who	► ► re	ceived more than	\$100.000	of			
reportable compensation from the orga		6	5			/ -	-			-			
Did the organization list any form	er officer, directo	r, or	trus	stee	e, k	key ei	mp	loyee, or highest	compens	ated		Yes	٢
employee on line 1a? If "Yes," complete											3		-
For any individual listed on line 1a, organization and related organization													
individual											4	Х	_
Did any person listed on line 1a rec for services rendered to the organization											5		
Section B. Independent Contractors	at componented in			~ ~			a 4	hat reactived mare	than \$100	000 of			
Complete this table for your five higher compensation from the organization. F year.													
(A Name and busi								(B) Description of se	rvices	Co	(C)	sation	
											pone		
							1						_

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hours per week (list any hours for related organizations below dotted (do not check more than one box, unless person is both an officer and a director/trustee) (do not check more than one box, unless person is both an officer and a director/trustee) compensation from the organizations compensation related compensation from the organizations compensation (W-2/1099-MISC) compensation related	Estimated mount of other mpensation from the ganization nd related ganizations		Reporta	Reportable			ition	Dee				NI 1.00
reased manual back date: below date	from the ganization nd related		relate	compensation	n	both a	more rson i	heck ss pe	unle	box,	hours per week (list any	Name and title
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MEMBER 0 x 0 0 b Sub-total • • 0 0 c Total from continuation sheets to Part VII, Section A • • 0 0 d Total (add lines 1b and 1c) • • 0 0 0 c Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization • 6 6 c Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 c For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 3 c Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax				0				Δ			-	
b Sub-total Image: Construction is beets to Part VII, Section A c Total from continuation sheets to Part VII, Section A Image: Construction is beets to Part VII, Section A d Total (add lines 1b and 1c) Image: Construction is to part VII, Section A e Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization is to any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax		0		0						v	+	
c Total from continuation sheets to Part VII, Section A Image: Content in the image: Content image: Conten image: Content image: Content image: Content image: C		0		U						X	0	
 B Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		of	\$100,000	ived more than	rec				liste	nose	limited to t	c Total from continuation sheets to Part VII, s d Total (add lines 1b and 1c)
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Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax												
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compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax												-
	(compensation from the organization. Report
		(C) Compen	rvices	(B) Description of se							Iress	(A) Name and business ac

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

Page **8**

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EXECUT) YELENA MEMBER) NORMAN MEMBER) SHERILI MEMBER) GERALD MEMBER	BERNSTEIN L BERK	(B) Average hours per week (list any hours for related organizations below dotted line) 55.00 0 .70 0 .70 0	box, office or director X	unles	heck ss pe	erson	e than or is both a or/truste employee	an	Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Est am comp fro orga and	(F) imated ount of other pensatio m the inization related nizatior
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EXECUT) YELENA MEMBER) NORMAN MEMBER) SHERILI MEMBER) GERALD MEMBER	IVE VICE PRESIDENT & CEO BARAKH BERNSTEIN L BERK	0 .70 0 .70			x		ă					
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) MARK KA	AHAN	.70										
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	M. SCHAEFFER	2.00										
	RESIDENT	0	Х		Х				0	0		
) TINA SM	MALL	.70										
MEMBER		0	X						0	0		
3) RALPH S	SDWECK	.70	-									
MEMBER		0							0	0		
) EILEEN		55.00	-				37		000 000	0		11 -
	OPERATING OFFICER	0					Х		238,363.	0		11,7
b Sub-total				• • •		• • •						
	n continuation sheets to Part VII, So	-	• • •	• • •	• •	• •						
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	compensation from the organization			iiste 5	a ai	DOVE	e) who	re	ceived more than	5100,000 01		
												Yes
	organization list any former offic											
employee	on line 1a? If "Yes," complete Schedu	ule J for su	ch ind	lividu	ual						3	
For any in	ndividual listed on line 1a, is the s	sum of rep	oortab	ole c	com	pen	sation	ar	nd other compens	ation from the		
organizatio	on and related organizations gre	eater than	\$15	50,0	00?	P If	"Yes,	" (complete Schedu	le J for such		
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	erson listed on line 1a receive or											
	s rendered to the organization? If "Ye	es," comple	te Sch	nedu	ıle J	I for	such _l	pers	son		5	
	dependent Contractors this table for your five highest com	noncotod :	ndona	anda	ont -	000	rooter	- + ¹	hat reached mars	than \$100 000 -	f	
	this table for your five highest com tion from the organization. Report c											
,	(A)								(B)		(C)	
	Name and business add	ress							Description of se	rvices C	ompens	ation

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Part VII Section A. Officers, Directors,	Trustees, Ke	y En	nploy	yee	es, a	and H	lig	hest Compensat	ed Emplo	yees (co	ontinue	ed)	
(A) Name and title	(B) Average hours per week (list any hours for	box,	not ch unles:	s pe a d	ition more rson	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		am	(F) timated tount of other pensation	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		orga and	om the anizatio d related inizatior	b
25) AVITAL INGBER	55.00												-
CHIEF DEVELOPMENT OFFICER	0					Х		218,149.		0		16,9	125.
.26) VICKIE MARX CHIEF OF STAFF	55.00					х		152,111.		0		7,5	572.
27) STACYE N. ZEISLER	55.00											.,-	
CHIEF MARKETING OFFICER	0	1				Х		146,067.		0		7,2	289.
.28) ISABELLA YUSIMOVA	55.00												
CHIEF FINANCIAL OFFICER	0	-				X		128,382.		0		16,3	21
		-											
1b Sub-total c Total from continuation sheets to Part VII.							►						
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n 	ot limited to t	hose	listed	d at		e) who	► o re	eceived more than	\$100.000	of			
reportable compensation from the organization			5			,						Yes	No
3 Did the organization list any former of employee on line 1a? If "Yes," complete Sch											3		X
4 For any individual listed on line 1a, is the organization and related organizations	greater than	\$15	50,00)0?	lf	"Yes	s,"	complete Schedu	le J for	such		37	
<i>individual</i>5 Did any person listed on line 1a receive for services rendered to the organization? <i>If</i>	or accrue co	mpen	satio	on f	rom	n any	un	related organization	on or indiv	idual	4	X	X
Section B. Independent Contractors	100, 00111010	10 00/	louui		101	00011	por				Ū		
1 Complete this table for your five highest co compensation from the organization. Repory year.													
(A) Name and business	address							(B) Description of se	ervices	Co	(C) ompens	ation	
							+						
							+						

Par	rt VII	Statement of Reven Check if Schedule O co		nse or note to an	v line in this Part VII	1		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a	54,691.				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
fts, r An	c	Fundraising events		83,647.				
, Gi nila	d	Related organizations						
ions	е	Government grants (contribu	,	631,250.				
ibut	f	All other contributions, gifts,		33,453,191.				
d O		and similar amounts not included Noncash contributions included in		8,175,318.				
an Co	g h	Total. Add lines 1a-1f			34,222,779.			
anu				Business Code				
Program Service Revenue	2a							
e R	b							
rzic	c							
Se	d							
ram	е							
rog	f	All other program service rev						
	g	Total. Add lines 2a-2f			0			-
	3	· ·	cluding divider		2 010 245		586,433.	1 421 012
		and other similar amounts).			2,018,245.		586,433.	1,431,812
	4 5	Royalties	•		0			
			(i) Real	(ii) Personal				
	6a	Gross rents	1,797,840.					
	b	Less: rental expenses	1,929,886.					
	c	Rental income or (loss)	-132,046.					
	d	Net rental income or (loss	.)	▶	-132,046.		609,230.	-741,276
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	27,074,371.					
	b	Less: cost or other basis						
		and sales expenses	23,998,646.					
	c	Gain or (loss)	3,075,725.					
_	d	Net gain or (loss)		▶	3,075,725.			3,075,725
Other Revenue	8a	Gross income from fundra	-	ATCH 4				
ver		events (not including \$						
Re		of contributions reported on	,	133,395.				
er	b	See Part IV, line 18						
th	c b	Net income or (loss) from ful			-80,753.			-80,753
0	9a	Gross income from gaming	-					
		See Part IV, line 19						
	b	Less: direct expenses	b					
	c	Net income or (loss) from g	aming activities.	▶	0			
	10a	Gross sales of inventor returns and allowances						
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sal			0			
		Miscellaneous Reven		Business Code				
	11a	OTHER MISCELLANEOUS INCOM		900099	755,852.			755,852
	b							
	C							
	d	All other revenue Total. Add lines 11a-11d			755,852.			
	е 12	Total revenue. See instructio			39,859,802.		1,195,663.	4,441,360

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Chack if Schodula O contains a reaso	nee or note to any line	in this Dart IV		
Check if Schedule O contains a respo			(C)	
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	19,135,084.	19,135,084.		
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors,				
trustees, and key employees	501,615.	130,420.	140,452.	230,743
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	5,064,460.	1,295,274.	1,465,624.	2,303,562
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	258,107.	45,022.	114,830.	98,255
9 Other employee benefits	400,019.	109,448.	154,651.	135,920
10 Payroll taxes	376,601.	104,302.	105,633.	166,666
11 Fees for services (non-employees):				
a Management	0			
b Legal	600.	600.		
c Accounting	100,796.	26,274.	74,522.	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	59,304.			59,304
f Investment management fees	254,985.	193,788.	25,499.	35,698
g Other. (If line 11g amount exceeds 10% of line 25, column	,	,	,	
(A) amount, list line 11g expenses on Schedule O.)	1,242,655.	520,229.	231,608.	490,818
12 Advertising and promotion	76,508.	58,496.	10,978.	7,034
13 Office expenses	628,157.	289,942.	111,698.	226,517
14 Information technology	0			,
	0			
,	368,222.	116,806.	79,611.	171,805
16 Occupancy	211,400.	108,801.	55,025.	47,574
17 Travel	211,400.	100,001.	55,025.	17,571
18 Payments of travel or entertainment expenses	0			
for any federal, state, or local public officials	143,427.	99,385.	25,249.	18,793
19 Conferences, conventions, and meetings	143,427.	, 505.	23,249.	10,795
20 Interest	0			
21 Payments to affiliates	229,032.	25,726.	153,031.	50,275
22 Depreciation, depletion, and amortization		25,720.		50,275
23 Insurance	31,024.		31,024.	
24 Other expenses. Itemize expenses not covered				
above (List miscellaneous expenses in line 24e. If				
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O.)	52.000	FO FOO	0.065	
aMISSIONS	53,060.	50,793.	2,267.	1.64.020
bMISCELLANEOUS	601,256.	292,600.	143,817.	164,839
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	29,736,312.	22,602,990.	2,925,519.	4,207,803
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	I	1		

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Page	1	1
i aye		

Part X				Fage I
	Check if Schedule O contains a response or note to any line in this Pa		<u></u>	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	0	1	
2	Savings and temporary cash investments	7,824,520.	2	2,466,100
3	Pledges and grants receivable, net	5,362,886.	3	4,990,096
4	Accounts receivable, net	55,198.	4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L Loans and other receivables from other disgualified persons (as defined under section	75,000.	5	75,000
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers			
	and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
s,	organizations (see instructions). Complete Part II of Schedule L	0	-	
Assets	Notes and loans receivable, net	0		1,600,000
-	Inventories for sale or use	0	-	
9	Prepaid expenses and deferred charges	0	9	
10 a	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 23, 203, 804.			
	Less: accumulated depreciation 10b 2,807,598.	16,281,024.		20,396,206
11	Investments - publicly traded securities	73,415,206.		90,027,529
12	Investments - other securities. See Part IV, line 11	102,958,619.		94,161,789
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	0 110 610
15	Other assets. See Part IV, line 11	10,152,867.	15	8,119,612
16	Total assets. Add lines 1 through 15 (must equal line 34)	216,125,320.	16	221,836,332
17	Accounts payable and accrued expenses	4,528,658. 9,761,259.	17 18	4,275,885
18	Grants payable		18	9,656,529
19 20	Deferred revenue	8,600,000.	20	8,600,000
	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		20	0,000,000
Liabilities	Loans and other payables to current and former officers, directors,	0	21	
	trustees, key employees, highest compensated employees, and			
Lia	disqualified persons. Complete Part II of Schedule L	0	22	
23	Secured mortgages and notes payable to unrelated third parties	4,525,000.	23	4,235,000
24	Unsecured notes and loans payable to unrelated third parties	3,660,700.	24	2,710,700
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	43,625,117.	25	45,250,725
26	Total liabilities. Add lines 17 through 25	74,700,734.	26	74,728,839
	Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗵 and			
Fund Balances 8 2 6 2 6 2 8 2 6 2 6 2 8 2 6 2 7	complete lines 27 through 29, and lines 33 and 34.			
G 27	Unrestricted net assets	48,193,720.	27	51,187,172.
82 28	Temporarily restricted net assets	69,060,854.	28	69,507,934.
짙 29	Permanently restricted net assets	24,170,012.	29	26,412,387
or Fu	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
Net Assets or 2 2 2 2 3	Capital stock or trust principal, or current funds		30	
ຍ ທີ່ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
₹ 32	Retained earnings, endowment, accumulated income, or other funds		32	
a 33	Total net assets or fund balances	141,424,586.	33	147,107,493.
34	Total liabilities and net assets/fund balances	216,125,320.	34	221,836,332.
				Form 990 (20

THE	JEWISH	FEDERATION	OF	GREATER

Form 99	90 (2014)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	89,8	59,8	302.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	29,7	36,3	312.
3	Revenue less expenses. Subtract line 2 from line 1	3			23,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14	1,4	24,5	586.
5	Net unrealized gains (losses) on investments	5	-	2,5	69,2	246.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-	1,8	71,3	337.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
_	33, column (B))	10	14	7,1	07,4	93.
Part						
	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 X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	kplain	in			
	Schedule O.					
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	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	а			
	separate basis, consolidated basis, or both:					
	Separate basis X 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 c	oversig	ght			
	of the audit, review, or compilation of its financial statements and selection of an independent acc	ountar	nt?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	in			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in			
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		he			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such aud	dits.		3b		

SCHEDULE A

(Form	990	or	990-EZ))
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Public Charity Status and Public Support

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

Open to Public Attach to Form 990 or Form 990-EZ. Department of the Treasury Inspection Internal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization THE JEWISH FEDERATION OF GREATER Employer identification number WASHINGTON, INC. 53-0212445 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. е Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). g (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of support (see (described on lines 1-9 listed in your governing other support (see above or IRC section document? instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

Total

OMB No. 1545-0047

Schedule A (Form 990 or 990-EZ) 2014

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	24,514,183.	33,419,344.	29,572,420.	30,460,038.	34,222,779.	152,188,764.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	24,514,183.	33,419,344.	29,572,420.	30,460,038.	34,222,779.	152,188,764.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						13,708,573.
6	• •						138,480,191.
	tion B. Total Support	() 0040	(1) 0044	() 0040	(1) 0040	() 0044	(0 T /)
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	24,514,183.	33,419,344.	29,572,420.	30,460,038.	34,222,779.	152,188,764.
9	sources	644,475.	1,863,815.	2,216,530.	3,250,150.	3,816,085.	11,791,055.
Ū	activities, whether or not the business is regularly carried on	404,889.	445,432.	708,004.	900,131.	646,795.	3,105,251.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	786,505.	882,775.	793,236.	676,239.	755,852.	3,894,607.
11	Total support. Add lines 7 through 10						170,979,677.
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is forganization, check this box and stop here	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2014 (li	ne 6, column (f)	divided by line	11, column (f))		14	80.99%
15	Public support percentage from 2013		-			15	84.22%
16a	331/3% support test - 2014. If the o					331/3 % or mo	re, check
	this box and stop here. The organization	-					
b	331/3% support test - 2013. If the c			-			
	check this box and stop here. The orga						
17a	10%-facts-and-circumstances test - 2	2014. If the org	anization did no	ot check a box	on line 13, 16a	a, or 16b, and I	ine 14 is
	10% or more, and if the organization	meets the "fac	cts-and-circumst	ances" test, ch	eck this box a	nd stop here. E	xplain in
	Part VI how the organization meets t	he "facts-and-c	ircumstances" te	est. The organiz	zation qualifies	as a publicly s	upported
	organization			-			▶□
b	10%-facts-and-circumstances test - 2						and line
	15 is 10% or more, and if the orga	anization meets	the "facts-and	l-circumstances	' test, check tl	his box and st	op here.
	Explain in Part VI how the organizati						-
	supported organization				-		
18	Private foundation. If the organization	did not check a	a box on line 13,	16a, 16b, 17a	, or 17b, check	this box and see	
	instructions						<u></u> ► <u>∟</u>

Schedule A (Form 990 or 990-EZ) 2014

Part III

Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support					-	
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	4 (f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b. Public support (Subtract line 7c from						
Ū	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	4 (f) Total
9	Amounts from line 6						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
h	Sources						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
~	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						504()(0)
14	First five years. If the Form 990 is for	-			•		
500	organization, check this box and stop here. tion C. Computation of Public Sup						
<u>3ec</u> 15	Public support percentage for 2014 (line 8,			mn (f))		45	%
	Public support percentage for 2014 (life 8, Public support percentage from 2013 Sched					15	<u>~~~</u> %
16 Soc	tion D. Computation of Investmen					16	/0
				12 a aluman (f))		47	0/
17 1 0	Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))17%Investment income percentage from 2013 Schedule A, Part III, line 1718%						
18						18 18	%
198	331/3% support tests - 2014. If the org						
L.	17 is not more than 331/3%, check this	-	•	-			
a	331/3% support tests - 2013. If the organ						
20	line 18 is not more than 331/3%, check Private foundation. If the organization of		•	•			•
20 JSA	Filvate roundation. If the organization of	na not check		14, 15a, UI 190			

Yes No

1

2

3a

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990 or 990-EZ) 2014

-	le A (Form 990 or 990-EZ) 2014		F	Page 5
Part	V Supporting Organizations (continued)		24	
	the start of the second start of the start of the factor of the falls of the second start of the		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
	on B. Type I Supporting Organizations			<u> </u>
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If</i> "Yes," <i>explain in</i> Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		Vaa	
			res	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations	•		<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct			
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3 a	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
L.	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
a	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

THE JEWISH FEDERATION OF GREATER Schedule A (Form 990 or 990-EZ) 2014		55-	U212445 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizatior	IS	
Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must correct or the statement of the sta	g trust or	n Nov. 20, 1970. See in	structions. All
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

	Type III Non-Functionally Integrated 509(a)(3) ion D - Distributions	Cappointy Cigamizat		Current Year
				Current rear
1	Amounts paid to supported organizations to accomplish ex		I	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ea	
•	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organiz	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h				
i	Carryover from 2009 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
Ũ	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
0	-			
	and 4b from line 1 (if amount greater than zero, see			
-	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
C				
d	Excess from 2013			
е	Excess from 2014			

Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II - OTHER INCOME							
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL	
MISCELLANEOUS INCOME	786,505.	882,775.	793,236.	676,239.	755,852.	3,894,607.	
TOTALS	786,505.	882,775.	793,236	676,239.	755,852.	3,894,607.	

Schedule B Schedule of Contributors			OMB No. 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	epartment of the Treasury			
Name of the organization		Employe	r identification number	
THE JEWISH FEDE	RATION OF GREATER			
WASHINGTON, INC		53-0	212445	
Organization type (che	ck one):			
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private	oundation		
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foun	dation		
	501(c)(3) taxable private foundation			

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization THE JEWISH FEDERATION OF GREATER WASHINGTON, INC.

Employer identification number 53-0212445

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 1 _		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 2 _		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 3 _		\$3,418,727.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 4 _		\$4,500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 5 _		\$2,185,901.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 6 _		\$1,688,072.	Person Payroll Noncash (Complete Part II for noncash contributions.)

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ime of of	ganization THE JEWISH FEDERATION OF GREATER	Employer i	dentification number
	WASHINGTON, INC.		53-0212445
art II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	STOCKS AND BONDS	\$3,418,727.	06/30/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	STOCKS AND BONDS	\$1,688,072.	_06/30/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

\$_

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

	Form 990, 990-EZ, or 990-PF) (2014) ganization THE JEWISH FEDERATION WASHINGTON, INC.	OF GREATER		Page 4 Employer identification number 53-0212445		
Part III	Exclusively religious, charitable, etc. that total more than \$1,000 for the y following line entry. For organizations contributions of \$1,000 or less for th Use duplicate copies of Part III if addit	/ear from any one of scompleting Part III, e year. (Enter this in	contributor. Comp enter the total of a formation once. S	cribed in section 501(c)(7), (8), or (10) blete columns (a) through (e) and the exclusively religious, charitable, etc.,		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, at	1d 2lP + 4		nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
				<u> </u>		
	Transferee's name, address, ar	(e) Transf nd ZIP + 4		nship of transferor to transferee		
JSA				Schedule B (Form 990, 990-EZ, or 990-PF) (2014)		

	IEDULE D	Supplem	ental Financial Statement	ts	OMB No. 1545-0047	
(Fo	Complete if the organization answered "Yes" to Form 990,				2014	
	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.					
	rtment of the Treasury nal Revenue Service	Information about Schedule	 Attach to Form 990. D (Form 990) and its instructions is at www.i 	irs.aov/form990.	Open to Public Inspection	
		THE JEWISH FEDERATION		Employer identifica		
WAS	SHINGTON, INC.			53-021244	15	
Ра	rt I Organiza	tions Maintaining Donor Adv	ised Funds or Other Similar Funds o	or Accounts.		
	Complete	e if the organization answered	"Yes" to Form 990, Part IV, line 6.			
			(a) Donor advised funds	(b) Funds and	other accounts	
1	Total number at e	nd of year	189.			
2		of contributions to (during year)	9,028,112.			
3		of grants from (during year)	6,382,199.			
4		at end of year	58,650,922.			
5	-		advisors in writing that the assets held		X Yes No	
~	-		e organization's exclusive legal control?		X Yes No	
6	-	-	and donor advisors in writing that grant fit of the donor or donor advisor, or for			
	-				X Yes No	
Pa		tion Easements.				
1 0			"Yes" to Form 990, Part IV, line 7.			
1			organization (check all that apply).			
	Preservatio	n of land for public use (e.g., rec	reation or education) 🛛 Preservatior	n of a historically imp	portant land area	
	Protection of	of natural habitat	Preservation	n of a certified histor	ic structure	
	Preservatio	n of open space				
2	-		eld a qualified conservation contribution i			
		ast day of the tax year.		Held at the	End of the Tax Year	
а				2a		
b	-	-	· · · · · · · · · · · · · · · · · · ·	2b		
c			historic structure included in (a)	2c		
d			acquired after 8/17/06, and not on a	a 2d		
3		-	sferred, released, extinguished, or term		ization during the	
3			sieneu, releaseu, exinguisneu, or term	inated by the organ	ization during the	
4			rvation easement is located \blacktriangleright			
5			garding the periodic monitoring, inspe			
	-		sements it holds?	-		
6			specting, and enforcing conservation ea		/ear	
	▶					
7	Amount of expens	es incurred in monitoring, inspec	ting, and enforcing conservation easeme	ents during the year		
	▶\$					
8			e 2(d) above satisfy the requirements of s			
9			conservation easements in its revenue ar f the footnote to the organization's finan			
		counting for conservation easeme	5			
Ра		<u> </u>	of Art, Historical Treasures, or Othe	er Similar Assets.		
			"Yes" to Form 990, Part IV, line 8.			
1a	If the organization works of art, hist public service, pro	n elected, as permitted under SF orical treasures, or other simila vide, in Part XIII, the text of the fo	FAS 116 (ASC 958), not to report in its assets held for public exhibition, ed botnote to its financial statements that de	revenue statement ucation, or researc escribes these items.	and balance sheet and furtherance of	
b	If the organization works of art, hist public service, pro	n elected, as permitted under s orical treasures, or other simila vide the following amounts relati	SFAS 116 (ASC 958), to report in its ar assets held for public exhibition, ed ng to these items:	revenue statement ucation, or researc	and balance sheet h in furtherance of	
	(i) Revenue inclue	ded in Form 990, Part VIII, line 1	-	▶\$.		
	(ii) Assets include	d in Form 990, Part X		▶\$.		
2	If the organizatio	n received or held works of a	rt, historical treasures, or other similar	assets for financia		
	following amounts	required to be reported under S	FAS 116 (ASC 958) relating to these iter	ns:		
a b	Revenue included	in Form 990, Part VIII, line 1		▶\$. ▶ ¢		

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Schedule D (Form 990) 2014

Sche	dule D (Form 990) 2014							Page 2		
Par	t III Organizations Maintainir	ng Collections of	Art, Historical T	reasures,	or Other Simi	lar Asse	ts (continu	ied)		
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its									
	collection items (check all that apply):									
а	Public exhibition	d Loan or exchange programs								
b	Scholarly research		e Other							
C	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9,										
or reported an amount on Form 990, Part X, line 21.										
1a	a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not									
	included on Form 990, Part X? Yes 🛛 X No									
b										
						Amount				
С	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance									
	Did the organization include an am					-				
	If "Yes," explain the arrangement in									
Par	t V Endowment Funds. Com						()=	<u> </u>		
4 -		(a) Current year	(b) Prior year	(c) Two yea		years back	(e) Four year			
	Beginning of year balance	13,858,699.	123,222,161.				98,440			
	Contributions Net investment earnings, gains,	13,050,099.	14,783,350.	9,510	,209. 11,01	L2,437.	6,836	,004.		
U	and losses	2,252,097.	18,577,756.	15,247	193 _80	97,002.	17,675	843		
Ь	Grants or scholarships	2,252,057.	18,415,229.	14,322		L5,772.	10,865			
	Other expenditures for facilities		10,110,220.	11,522	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		10,000	,000.		
•	and programs	11,574,414.	743,267.							
f	Administrative expenses	2,088,635.	,							
g	End of year balance		137,424,771.	123,222	,161. 112,78	37,466.	112,087	,803.		
2	End of year balance 139,872,518. 137,424,771. 123,222,161. 112,787,466. 112,087,803 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 112,087,803 112,083,803									
а	Board designated or quasi-endowm									
b	Permanent endowment 18.8	800 %	-							
С	Temporarily restricted endowment	▶ 48.2500 %								
	The percentages in lines 2a, 2b, an	nd 2c should equal 1	00%.							
3a	Are there endowment funds not in	the possession of the	ne organization that	are held an	d administered fo	r the				
	organization by:						Yes	No		
	(i) unrelated organizations						3a(i)	X		
	(ii) related organizations						3a(ii) 🛛			
b	If "Yes" to 3a(ii), are the related or	0					3b X			
4	Describe in Part XIII the intended u									
Par	t VI Land, Buildings, and Equi Complete if the organiza	i pment. fion answered "Ye	s" to Form 990 P	art IV line	11a See Form	990 Part	X line 10			
	Description of property	(a) Cost or	other basis (b) Cost	or other basis other)	(c) Accumulated depreciation		I) Book value			
1a	Land		2,5	2,534,100.		2,534,100		100.		
b	Buildings		17,4	128,696.	928,802		16,499,	894.		
С	Leasehold improvements	[
d	Equipment	[1,8	362,589.	1,367,083		495,	506.		
	Other			378,419.	511,713		866,			
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)										
						Sched	ule D (Form 99	90) 2014		

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Page 3

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ABSOLUTE RETURN	16,494,562.	FMV
(B) DIRECTIONAL HEDGE	27,316,601.	FMV
(C) REAL ASSETS	4,884,668.	FMV
(D) PRIVATE EQUITY	2,004,048.	FMV
(E) INTERNATIONAL EQUITY	14,583,252.	FMV
(F) FUND OF FUNDS - PRIVATE EQUITY	18,819,553.	FMV
(G) FIXED INCOME FUND - GLOBAL	10,059,105.	FMV
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	94,161,789.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SPLIT INTEREST AGREEMENT	8,428,088.
(3) DUE TO AGENCIES	36,797,725.
(4) INTEREST RATE SWAP LIABILITY	24,912.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 🕨	45,250,725.

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

Х

Schedu	le D (Form 990) 2014		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	37,249,719.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a -2,569,246.		
b	Donated services and use of facilities 2b	1	
С	Recoveries of prior year grants 2c	1	
d	Other (Describe in Part XIII.) 2d 214,148.	1	
е	Add lines 2a through 2d	2e	-2,355,098.
3	Subtract line 2e from line 1	3	39,604,817.
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 254, 985.		
b	Other (Describe in Part XIII.) 4b		
C	Add lines 4a and 4b	4c	254,985.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	39,859,802.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	29,695,475.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	-	20,000,110.
a	Depoted convises and use of facilities		
b	Prior year adjustments		
c	Other losses 20		
d	Other (Describe in Part VIII)		
e	Add lines 2a through 2d	20	214,148.
3		2e 3	29,481,327.
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	29,401,327.
a h			
b	· · · · · · · · · · · · · · · · · · ·		254 005
с 5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)	4c 5	254,985. 29,736,312.
Part		Э	29,730,312.
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Patt IV,	art V. I	ne 4: Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
SEE	2 PAGE 5		

Schedule D (Form 990) 2014

PART V, LINE 4:

THE ENDOWMENT FUND CATALYZES DIVERSE FUNDING SOURCES TO LEVERAGE OUR ABILITY TO MEET JEWISH NEEDS AND EFFECT CHANGE, AWARDS SEED MONEY TO NEW AND INNOVATIVE INITIATIVES FOR ENRICHING JEWISH LIFE AND FOR TIKKUN OLAM, FURNISHES FUNDS FOR UNANTICIPATED AND EMERGENCY NEEDS AND GENERATES PERMANENT FUNDS TO SUPPORT THE FEDERATION AGENCY FAMILY.

PART X, LINE 2:

THE FEDERATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED. THE FEDERATION'S MANAGEMENT BELIEVES IT HAS NO MATERIAL UNCERTAIN TAX POSITIONS AND; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS.

PART XI, LINE 2D:

FUNDRAISING EXPENSES NETTED AGAINST INCOME - \$214,148.

PART XII, LINE 2D:

FUNDRAISING EXPENSES NETTED AGAINST INCOME - \$214,148.

Supplemental Information Regarding Fundraising or Gaming Activities						Activities	OMB No. 1545-0047
SCHEDULE G	Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.						
(Form 990 or 990-EZ)		•	more than \$1 to Form 990	-			Open to Public
Department of the Treasury Internal Revenue Service	Information al	bout Schedule G (Form				s.gov/form990.	Inspection
Name of the organization	THE JEWISH FE	DERATION OF C	GREATER			Employer identification	on number
WASHINGTON, INC.						53-0212445	
Bart	ng Activities. Con)-EZ filers are not				"Yes" to Form 9	90, Part IV, line	17.
	the organization rai				activities. Check a	Ill that apply.	
a X Mail solicitat	ions	e	Solic	itation of I	non-government g	rants	
	email solicitations	f			government grants	6	
c X Phone solicit		g	X Spec	cial fundra	ising events		
d X In-person so 2a Did the organizat		r oral agroomont v	with any ing	dividual (in	oluding officers d	iroctore tructore	
	s listed in Form 990						X Yes No
b If "Yes," list the t	en highest paid ind	ividuals or entities		•		•	fundraiser is to be
compensated at I	east \$5,000 by the	organization.					
						(v) Amount paid to	
(i) Name and addre or entity (fu		(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1		TELEPHONE					
SEIGEL MARKETING	GROUP	CALLS		Х	224,794.	59,304.	165,491.
2							
3							
4							
5							
5							
6							
7							
1							
8							
9							
10							
			-1				
				<u> </u>	224,794.	59,304.	165,491.
3 List all states in registration or lice	which the organiza ensing.	ition is registered of	or licensed	to solicit	contributions or	has been notified	it is exempt from
DC, MD, VA,							

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Schedule G (Form 990 or 990-EZ) 2014

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		gross receipts greater than \$5,0				
			(a) Event #1 NETWORK KICKOFF	(b) Event #2 ROUTES	(c) Other events 6 .	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	86,163.	28,769.	102,110.	217,042.
		Less: Contributions	54,661.	18,055.	10,931.	83,647.
	3	Gross income (line 1 minus line 2)	31,502.	10,714.	91,179.	133,395.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs		7,965.	23,134.	31,099.
t Expe	7	Food and beverages	23,125.	6,969.	40,898.	70,992.
Direc	8	Entertainment			1,400.	1,400.
	9	Other direct expenses	63,039.	15,823.	31,795.	110,657.
	10	214,148.				
	11 art	Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E	anization answered "Y			-80,753. rted more
Revenue		, , , , , , , , , , , , , , , , , 	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	9 Yes% No	Yes%	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)		
	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)	<u>.</u> •	
9	E	nter the state(s) in which the organizat	ion conducts gaming ac	tivities:		

a is the organization	on licensed to co	nduct gaming activ	ities in each of these states	S?	
b If "No," explain:					

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2014

ΓHE	JEWISH	FEDERATION	OF	GREATER

	THE JEWISH FEDERATION OF GREATER	53-02124	145	
Sched	ule G (Form 990 or 990-EZ) 2014			Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entit		<u>-</u> ,, г	
4.0	formed to administer charitable gaming?	, ₍ . L	Yes	No
13	Indicate the percentage of gaming activity conducted in:	120		%
a b	The organization's facility An outside facility			<u> </u>
14	Enter the name and address of the person who prepares the organization's gaming/special events book			
	records:			
	Name			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives	gaming		
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the		
	amount of gaming revenue retained by the third party ► \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
4 -				
17	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming pro-	acada ta		
a	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga			
	or spent in the organization's own exempt activities during the tax year > \$			
Part				
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additic	onal informa	ation	
CCUI	(see instructions). EDULE G, PART 1, LINE 1			
SCU1	THE T			
ADDI	RESS OF SEIGEL MARKETING GROUP:			
P.0	. BOX 658598			
a				
CHI(CAGO, IL 60695			

SCHEDULEI	Grants a	nd Other /	Assistance f	o Organiza	tions	I	OMB No. 1545-0047
		and Other Assistance to Organizations, ents, and Individuals in the United States					
		•	swered "Yes" to F				2014
Com	iplete if the o	-	tach to Form 990.		line 21 or 22.		Open to Public
Department of the Treasury Internal Revenue Service	ation about S		n 990) and its inst		wirs any/form000		Inspection
Name of the organization THE JEWISH FEDERA			1 990) and its insti		w.ii s.gov/ioi iii 990.	Employer identificat	
WASHINGTON, INC.	AIION OF C	JKEAIEK				53-021244	
Part I General Information on Grants an	d Assistanc	0				55-021244	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	ts or assistand dures for mo	ce? nitoring the use	of grant funds in th	e United States.			X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient t							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AISH HATORAH OF DC							
11418 OLD GEORGETOWN RD.	94-3094990	501(C)(3)	23,110.				GRANTS FROM DAF AND
(2) AISH SEMINARS		561(6)(5)	20,1101				
6012 ROSELAND DR. ROCKVILLE, MD 20852	26-3589821	501(C)(3)	10,400.				GRANTS FROM DAF AND
(3) ALEF BET MONTESSORI SCHOOL							
7300 WHITTIER BLVD BETHESDA, MD 20817	20-8512281	501(C)(3)	15,500.				GRANTS FROM DAF AND
(4) ALEXANDER MUSS INSTITUTE							
78 RANDALL AVENUE	59-0173782	501(C)(3)	15,150.				GRANTS FROM DAF AND
(5) AMERICA-ISRAEL CULTURAL FOUNDATION							
1140 BROADWAY NEW YORK, NY 10001	13-1664048	501(C)(3)	8,147.				GRANTS FROM DAF AND
(6) AMERICAN COMMITTEE TEL AVIV FOUNDATION							
1201 BROADWAY STE 802 NEW YORK, NY 10001	13-3145161	501(C)(3)	32,000.				GRANTS FROM DAF AND
(7) AMERICAN FRIENDS OF ARIEL UNIVERSITY	_						
3145 CONEY ISLAND AVE BROOKLYN, NY 11235	06-1652733	501(C)(3)	50,000.				GRANTS FROM DAF AND
(8) AMERICAN FRIENDS OF HEBREW UNIVERSITY	_						
5100 WISCONSIN AVENUE WASHINGTON, DC 20016	13-1568923	501(C)(3)	53,815.				GRANTS FROM DAF AND
(9) AMERICAN FRIENDS OF LEKET ISRAEL	_						
101 CEDAR LN TEANECK, NJ 07666	20-8202424	501(C)(3)	15,000.				GRANTS FROM DAF AND
(10) AMERICAN FRIENDS OF LUBAVITCH							
2110 LEROY PLACE NW WASHINGTON, DC 20008	52-2193738	501(C)(3)	9,850.				GRANTS FROM DAF AND
(11) AMERICAN FRIENDS OF TEL AVIV UNIVERSITY							
39 BROADWAY NEW YORK, NY 10006	13-1996126	501(C)(3)	94,145.				GRANTS FROM DAF AND
(12) AMERICAN FRIENDS OF THE ISRAEL MUSEUM							
500 FIFTH AVENUE NEW YORK, NY 10110	23-7182582	501(C)(3)	68,603.				GRANTS FROM DAF AND

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

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

Schedule I (Form 990) (2014)

JSA

SCHEDULE I (Form 990) Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Example 1 (Form 990) Attach to Form 990.					OMB No. 1545-0047 2014 Open to Public Inspection		
Name of the organization THE JEWISH FEDERA	ATION OF G	REATER				Employer identificat	ion number
WASHINGTON, INC.						53-0212445	5
Part I General Information on Grants an		-					
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to 	ts or assistand dures for mor Domestic Or	e? nitoring the use ganizations a i	of grant funds in the nd Domestic Gov	e United States. /ernments. Com	nplete if the organiz	zation answered "Y	X Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN JEWISH COMMITTEE							
1156 15TH STREET, NW WASHINGTON, DC 20005	13-5563393	501(C)(3)	9,867.				GRANTS FROM DAF AND
(2) AMERICAN JEWISH WORLD SERVICE, INC.							
45 W. 36TH STREET NEW YORK, NY 10018	22-2584370	501(C)(3)	7,050.				GRANTS FROM DAF AND
(3) AMERICAN NATIONAL RED CROSS							
8550 ARLINGTON BLVD FAIRFAX, VA 22031	53-0196605	501(C)(3)	5,100.				GRANTS FROM DAF AND
(4) AMERICAN UNIVERSITY							
4400 MASSACHUSETTS AVE WASHINGTON, DC 20016	53-0196549	501(C)(3)	31,360.				GRANTS FROM DAF AND
(5) AMERICAN UNIVERSITY							
4400 MASSACHUSETTS AVE WASHINGTON, DC 20016	53-0196549	501(C)(3)	5,200.				GRANTS FROM DAF AND
(6) AMERICAN UNIVERSITY HILLEL							
4400 MASSACHUSETTS AVE WASHINGTON, DC 20016	52-6066696	501(C)(3)	16,800.				JEWISH EDUCATION SUP
(7) AMERICAN-ISRAEL FRIENDSHIP LEAGUE INC.							
134 EAST 39TH STREET NEW YORK, NY 10016	23-7252135	501(C)(3)	10,000.				GRANTS FROM DAF AND
(8) AMERICAN-ISRAELI COOPERATIVE ENTERPRISE							
2810 BLAINE DR CHEVY CHASE, MD 20815	52-1865861	501(C)(3)	10,000.				GRANTS FROM DAF AND
(9) AMIR							
510 3RD STREET OAKLAND, CA 94607	27-3114329	501(C)(3)	7,000.				GRANTS FROM DAF AND
(10) ANTI DEFAMATION LEAGUE	_						
1100 CONNECTICUT AVE WASHINGTON, DC 20036	13-2887439	501(C)(3)	5,519.				GRANTS FROM DAF AND
(11) ARENA STAGE	_						
1101 SIXTH STREET SW WASHINGTON, DC 20024	53-0246894	501(C)(3)	51,552.				GRANTS FROM DAF AND
(12) ATZUM INC.	_						
PO BOX 793 SKOKIE, IL 60076		501(C)(3)	10,000.				GRANTS FROM DAF AND
 2 Enter total number of section 501(c)(3) ar 3 Enter total number of other organizations 	-	-				▶ 	
For Panerwork Reduction Act Notice see the Instruct				· · ·		Sel	hodulo I (Eorm 990) (2014)

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Schedule I (Form 990) (2014)

SCHEDULE I		Grants a	nd Other /	Assistance t	o Organiza	tions	1	OMB No. 1545-0047
(Form 990)				ndividuals i				
					2014			
	Com	plete if the o	-	swered "Yes" to F tach to Form 990.	orm 990, Part IV,	line 21 of 22.		Open to Public
Department of the Treasury Internal Revenue Service	► Informa	tion about S		Inspection				
	THE JEWISH FEDERA						Employer identificat	-
WASHINGTON, INC.	IIE OEWIGII FEDERA		JILEATEIX				53-021244	
	mation on Grants an	d Assistanc	e				55 021211	5
the selection criteria 2 Describe in Part IV ti Part II Grants and C	on maintain records to s used to award the gran he organization's proce Other Assistance to D	ts or assistand dures for mor Iomestic Or	ce? nitoring the use ganizations a	of grant funds in the	e United States. vernments. Com	plete if the organiz	ation answered "	X Yes No
1 (a) Name and address or gover		(b) EIN	(c) IRC section if applicable	(d) Amount of cash	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AVODAH								
45 WEST 36TH ST. NEW	YORK, NY 10018	13-3914342	501(C)(3)	5,500.				GRANTS FROM DAF AND
(2) AVODAH - THE JEWISH S	SERVICE CORPS							
1816 12TH STREET WASH	IINGTON, DC 20009	13-3914342	501(C)(3)	15,700.				GRANTS FROM DAF AND
(3) BARKER FOUNDATION INC	1.	_						
7979 OLD GEORGETOWN R	COAD BETHESDA, MD 20814	52-0642791	501(C)(3)	10,017.				GRANTS FROM DAF AND
(4) BETH EL HEBREW CONGRE	GATION	_						
3830 SEMINARY ROAD AL	EXANDRIA, VA 22304	54-0681891	501(C)(3)	13,400.				COMMUNAL SUPPORT
(5) BETH SHOLOM CONGREGAT	ION AND TALMUD TORAH	_						
11825 SEVEN LOCKS ROA	D POTOMAC, MD 20854	53-0196574	501(C)(3)	27,167.				GRANTS FROM DAF AND
(6) BIKUR CHOLIM OF GREAT	ER WASHINGTON	_						
12320 PARKLAWN DRIVE	ROCKVILLE, MD 20852	52-2026976	501(C)(3)	7,026.				GRANTS FROM DAF AND
(7) BLUE CARD		_						
171 MADISON AVENUE NE	W YORK, NY 10016	13-1623910	501(C)(3)	120,000.				GRANTS FROM DAF AND
(8) B'NAI BRITH YOUTH ORG	ANIZATION	_						
6125 MONTROSE ROAD RO	CKVILLE, MD 20852	31-1794932	501(C)(3)	12,749.				COMMUNAL SUPPORT
(9) B'NAI B'RITH YOUTH OR	GANIZATION	-						
	WASHINGTON, DC 20001	31-1794932	501(C)(3)	46,850.				GRANTS FROM DAF AND
(10) BNAI ISRAEL CONGREGAT	NOI	-						
6301 MONTROSE RD. ROC		53-0212444	501(C)(3)	31,500.				GRANTS FROM DAF AND
(11) B'NAI ISRAEL CONGREGA	TION							

6301 MONTROSE ROAD ROCKVILLE, MD 20852	53-0212444	501(C)(3)	7,500.				COMMUNAL SUPPORT	
(12) B'NAI ISRAEL CONGREGATION								
6301 MONTROSE ROAD ROCKVILLE, MD 20852	53-0212444	501(C)(3)	11,800.				GRANTS FROM DAF AND	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								
3 Enter total number of other organizations list								

7,500.

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Schedule I (Form 990) (2014)

JSA

SCHEDULE I	Grants a	nd Other A	Assistance t	o Organiza	tions.		OMB No. 1545-0047
			ndividuals in	U	•		2014
Con	plete if the o	rganization ans	swered "Yes" to F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury		► At	tach to Form 990.				Open to Public
Internal Revenue Service	ation about Se	chedule I (Form	n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FEDER	ATION OF G	REATER				Employer identifica	tion number
WASHINGTON, INC.						53-021244	5
Part I General Information on Grants ar	nd Assistanc	e					
1 Does the organization maintain records to s	substantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the grar							X Yes No
2 Describe in Part IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to I	Domestic Or	ganizations a	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "	Yes" to Form 990,
Part IV, line 21, for any recipient	that received	more than \$5	,000. Part II can b	be duplicated if a	additional space is r	needed.	
					(f) Method of valuation		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) B'NAI SHALOM OF OLNEY							
18401 BURTFIELD DRIVE OLNEY, MD 20832	52-0981756	501(C)(3)	10,000.				GRANTS FROM DAF AND
(2) BNAI TZEDEK							
10621 SOUTH GLEN ROAD POTOMAC, MD 20854	52-1619672	501(C)(3)	7,500.				COMMUNAL SUPPORT
(3) BOWDOIN COLLEGE	_						
4100 COLLEGE STATION BRUNSWICK, ME 04011	01-0215213	501(C)(3)	15,000.				GRANTS FROM DAF AND
(4) BRAIN AND BEHAVIOR RESEARCH FUND							
90 PARK AVENUE 16TH FLOOR	11-3401438	501(C)(3)	30,000.				GRANTS FROM DAF AND
(5) BRANDEIS UNIVERSITY							
415 SOUTH STREET, MS014 WALTHAM, MA 02454	04-2103552	501(C)(3)	5,500.				JEWISH EDUCATION SUE
(6) CAMP JUDAEA							
1440 SPRING ST. NW. ATLANTA, GA 30309	58-6014651	501(C)(3)	10,000.				GRANTS FROM DAF AND
(7) CAMP RAMAH IN NEW ENGLAND							
1206 BOSTON PROVIDENCE HWY	04-3035964	501(C)(3)	100,000.				GRANTS FROM DAF AND
(8) CAMPAIGN FOR THE FAIR SENTENCING OF YOUTH							
1319 F ST NW WASHINGTON, DC 20004	27-3761788	501(C)(3)	10,000.				GRANTS FROM DAF AND
(9) CAPITAL CAMPS AND RETREAT CENTER	_						
11300 ROCKVILLE PIKE ROCKVILLE, MD 20852	52-1515202	501(C)(3)	36,715.				GRANTS FROM DAF AND
(10) CAPITAL CAMPS AND RETREAT CENTER	_						
11300 ROCKVILLE PIKE, SUITE 407	52-1515202	501(C)(3)	116,535.				COMMUNAL SUPPORT
(11) CAPITAL CAMPS AND RETREAT CENTER	_						
11300 ROCKVILLE PIKE, SUITE 407	52-1515202	501(C)(3)	34,500.				COMMUNAL SUPPORT
(12) CENTER FOR AUTO SAFETY	_						
2 Enter total number of section 501(c)(3) and		501(C)(3)	50,900.	l			GRANTS FROM DAF AND

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

Schedule I (Form 990) (2014)

3

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

(Form 990) Go	overnme	nts, and Ir	Assistance t ndividuals ii	n the United	d States	-	OMB No. 1545-0047
Com	plete if the o	-	swered "Yes" to F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury			tach to Form 990.				Open to Public
		•	n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FEDERA	ATION OF C	GREATER				Employer identificat	
WASHINGTON, INC.						53-021244	5
Part I General Information on Grants an		-					
1 Does the organization maintain records to s			e grants or assista	nce, the grantees	' eligibility for the grant	is or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce	dures for mo	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient t					additional space is r		es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CENTER FOR CREATIVE CHANGE							
3748 JENIFER STREET NW WASHINGTON, DC 20015	31-1801544	501(C)(3)	30,000.				GRANTS FROM DAF AND
(2) CHABAD OF SOUTH PALM BEACH							
242 SOUTH OCEAN BLVD MANALAPAN, FL 33462	57-1240142	501(C)(3)	20,000.				GRANTS FROM DAF AND
(3) CHABAD SHUL OF POTOMAC							
11701 GAINSBOROUGH ROAD POTOMAC, MD 20854	41-2100349	501(C)(3)	21,121.				GRANTS FROM DAF AND
(4) CHARLES E. SMITH JEWISH DAY SCHOOL							
1901 E. JEFFERSON STREET	52-0961920	501(C)(3)	480,317.				COMMUNAL SUPPORT
(5) CHARLES E. SMITH JEWISH DAY SCHOOL							
1901 E. JEFFERSON STREET	52-0961920	501(C)(3)	65,270.				GRANTS FROM DAF AND
(6) CHARLES E. SMITH LIFE COMMUNITIES	_						
6121 MONTROSE ROAD ROCKVILLE, MD 20852	53-0196508	501(C)(3)	52,878.				GRANTS FROM DAF AND
(7) CHILDREN'S INN AT NIH	_						
7 WEST DRIVE BETHESDA, MD 20814	52-1638207	501(C)(3)	10,100.				GRANTS FROM DAF AND
(8) CIESLA FOUNDATION	_						
5005 LINNEAN AVE NW WASHINGTON, DC 20008	13-3098494	501(C)(3)	7,500.				GRANTS FROM DAF AND
(9) CONGREGATION BETH EL OF MONTGOMERY COUNTY	_						
8215 OLD GEORGETOWN ROAD BETHESDA, MD 20814	52-0698176	501(C)(3)	11,787.				GRANTS FROM DAF AND
(10) CONGREGATION HAR SHALOM	_						
11510 FALLS ROAD POTOMAC, MD 20854	52-0824914	501(C)(3)	12,716.				GRANTS FROM DAF AND
(11) CORNELL UNIVERSITY	_						
130 E. SENECA STREET, SUITE 400	15-0532082	501(C)(3)	20,000.				GRANTS FROM DAF AND
(12) CRITTENTON SERVVCES OF GREATER WASHINGTON	_						
815 SILVER SPRING AVENUE		501(C)(3)	13,000.				GRANTS FROM DAF AND
 2 Enter total number of section 501(c)(3) ar 3 Enter total number of other organizations 						· · · · · · · · · · · · · · · · · · ·	
For Paperwork Reduction Act Notice, see the Instruc				.		Sc	hedule I (Form 990) (2014)

(Form 990) Covernments, and Individuals in the United States 2014 Department of the Treasury > Information about Schedule (Form 990) and its instructions is at www.irs.gov/form990. > Part I Complete if the organization number 53-0212445 Name of the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?. Image: Solution of the grants or assistance, the grant set assistance, and the selection criteria used to award the grants or assistance?. Image: Solution of the grants or assistance, and the selection criteria used to award the grants or assistance?. Image: Solution of the grants or assistance, and the selection criteria used to award the grants or assistance?. Image: Solution of the grants or assistance, and the selection criteria used to award the grants or assistance?. Image: Solution and Solutin and Solutin and Solutin and Solutin and Solution and	SCHEDULE I				N = = : = 1 = : = = = 1	• • • • • • • • • • • • • • • • • • •	1	I	OMB No. 1545-0047		
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.											
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Open to Public Inspection Name of the organization Not tack to Form 990, Part IV, line 21 or 22. Name of the organization THE JEWISH FEDERATION OF GREATER Employer identification number 53-0212445 Name of the organization maintain records to substantiate the amount of the grants or assistance, the grant colspan="2">Status of the organization maintain records to substantiate the amount of the grants or assistance, the grant colspan="2">Status of the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Part I Ceneral Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes 2 Describe in Part IV the organization full degrants or assistance? X Yes X 2 Describe in 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 not set water (g) Description of not assistance? (g) Description of not assistance? (g) Description of not assistance (g) Description of not assistance (g) Description of not assistance? (g) Description of not assistance (g) Description of not assistance (g)	(Form 990)			•					2014		
Department of the Treasury Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization THE JEWISH FEDERATION OF GREATER Employer identification number 53-0212445 WASHINGTON, INC. 53-0212445 2011 General Information on Grants and Assistance X 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes 2 Description Part IV the organizations procedures for monitoring the use of grant funds in the United States. Yes' to Form 990 PartIII Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes' to Form 990 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Duscription of non-cash assistance (i) Purpose of gr or assistance 11 Clutter Capitral of government 52-106/49 501 (c) (3) 10,000. (j) Description of non-cash assistance (h) Purpose of gr or assistance (j) Distributive OCIMARE 02-0222211 501 (c) (3) 10,000. (j) Description of non-cash assistance (h) Purpose of gr or assistance		Com	plete if the o	-			, line 21 or 22.				
Name of the organization THE JEWISH FEDERATION OF GREATER Employer identification number WASHINGTON, INC. 53-0212445 Part1 General Information on Grants and Assistance 1 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Image: Comparization answered "Yes" to Form 990 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (b) EIN (c) RC section (d) Amount of non-orash assistance (n) Description of non-orash assistance (n) Purpose of gn or assistance 9/5 F Startil. 9/5 F Startil. 9/5 F Startil. 9/1 Offender of valuation or government. (a) Name and address of organization (b) EIN (c) RC section (d) Amount of non-orash assistance (n) Purpose of gn or assistance 9/5 F Startil. 9/5 F Startil. 9/5 F Startil. 9/1 Offender of valuation or government. (g) Description of non-orash assistance (h) Purpose of gn or assistance (1) CULTURE CAPITAL. 9/2 Part North Kapita J Startific Star											
WASHINGTON, INC. 53-0212445 Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) RC section (d) mount of cash grants (d) mount of cash grants (d) mount of cash grants (d) mount of cash assistance (d) Method of valuation (d) (d) Description of or assistance (d) mount of cash grants (d) mount of cash grants (d) mount of cash grants (d) mount of cash (d) mount o				-	n 990) and its instr	uctions is at www	w.irs.gov/form990.				
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PartII Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 991 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (e) IRC section if applicable (f) Amount of cash organization (box, FM, apprisal, other) (g) Description of non-cash assistance (h) Purpose of gr or assistance (1) CULTURE CAPITAL 975 F ST NW MASHINGTON, DC 20004 52-1106749 501 (C) (3) 10,000. GRANTS FROM DAF (3) DISTRICT OF COLUMBIA JEWISH COMMUNITY CENTE 5132 06400000000000000000000000000000000000									X Yes No		
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(6) EMPOWERED WOMEN INTERNATIONAL 32-0066071 501(C)(3) 13,000. GRANTS FROM DAF 320 S. HENRY STREET ALEXANDRIA, VA 22314 32-0066071 501(C)(3) 13,000. GRANTS FROM DAF (7) FOUNDATION FOR THE NATIONAL ARCHIVES 52-1792608 501(C)(3) 15,000. GRANTS FROM DAF (8) FRIENDS OF THE ISRAEL DEFENSE FORCES Image: Comparison of the israel defense forces	(5) EDUCARE WASHINGTON, D	.C.									
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(7) FOUNDATION FOR THE NATIONAL ARCHIVES 52-1792608 501(C)(3) 15,000. GRANTS FROM DAF (8) FRIENDS OF THE ISRAEL DEFENSE FORCES C C C C C	(6) EMPOWERED WOMEN INTER	NATIONAL									
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(8) FRIENDS OF THE ISRAEL DEFENSE FORCES	(7) FOUNDATION FOR THE NA	TIONAL ARCHIVES									
	700 PENNSYLVANIA AVEN	UE NW	52-1792608	501(C)(3)	15,000.				GRANTS FROM DAF AND		
1430 BROADWAY, RM 1301 NEW YORK, NY 10018 13-3156445 501(C)(3) 8,900. GRANTS FROM DAF	(8) FRIENDS OF THE ISRAEL	DEFENSE FORCES	_								
	1430 BROADWAY, RM 130	1 NEW YORK, NY 10018	13-3156445	501(C)(3)	8,900.				GRANTS FROM DAF AND		
(9) GEORGE MASON UNIVERSITY	(9) GEORGE MASON UNIVERSI	TY	_								
4400 UNIVERSITY DRIVE FAIRFAX, VA 22030 52-2232458 501(C)(3) 16,800. JEWISH EDUCATION	4400 UNIVERSITY DRIVE	FAIRFAX, VA 22030	52-2232458	501(C)(3)	16,800.				JEWISH EDUCATION SUP		
(10) GEORGE WASHINGTON UNIVERSITY	(10) GEORGE WASHINGTON UNI	VERSITY	_								
714 21ST STREET, NW 2ND FLOOR 53-0196584 501(C)(3) 33,718. GRANTS FROM DAF	714 21ST STREET, NW 2	ND FLOOR	53-0196584	501(C)(3)	33,718.				GRANTS FROM DAF AND		
(11) GEORGE WASHINGTON UNIVERSITY	(11) GEORGE WASHINGTON UNI	VERSITY	_								
2300 H STREET, NW WASHINGTON, DC 20037 52-0749507 501(C)(3) 36,650. JEWISH EDUCATION	2300 H STREET, NW WAS	HINGTON, DC 20037	52-0749507	501(C)(3)	36,650.				JEWISH EDUCATION SUP		
(12) GEORGE WASHINGTON UNIVERSITY HILLEL	(12) GEORGE WASHINGTON UNI	VERSITY HILLEL	-								
2300 H ST NW WASHINGTON, DC 20037 52-6081729 501 (C) (3) 106,030. grants from daf 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table >									GRANTS FROM DAF AND		

3 Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

			Assistance f	-	•		OMB No. 1545-0047
		•	ndividuals i				2014
Com	plete if the o	-	swered "Yes" to F		line 21 or 22.		
Department of the Treasury			tach to Form 990.				Open to Public
	ation about S	chedule I (Form	n 990) and its inst	ructions is at www	v.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FEDERA	ATION OF G	BREATER				Employer identificat	
WASHINGTON, INC.						53-0212445	5
Part I General Information on Grants ar							
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	nts or assistand edures for mor	ce? nitoring the use	of grant funds in th	e United States.			X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient					additional space is r		es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GEORGETOWN DAY SCHOOL							
4530 MACARTHUR BLVD. NW	53-0204701	501(C)(3)	10,000.				GRANTS FROM DAF AND
(2) GESHER JEWISH DAY SCHOOL							
4700 SHIRLEY GATE ROAD FAIRFAX, VA 22030	54-1201968	501(C)(3)	62,370.				COMMUNAL SUPPORT
(3) GESHER SCHOOL INC.							
4800 MATTIE MOORE COURT FAIRFAX, VA 22030	54-1201968	501(C)(3)	10,909.				GRANTS FROM DAF AND
(4) GREATER MIAMI JEWISH FEDERATION							
4200 BISCAYNE BOULEVARD MIAMI, FL 33137	59-0624404	501(C)(3)	30,850.				GRANTS FROM DAF AND
(5) GREATER WASHINGTON JEWISH COAL.							
PO BOX 2266 ROCKVILLE, MD 20847	52-2259318	501(C)(3)	37,970.				GRANTS FROM DAF AND
(6) HABONIM DROR FOUNDATION INC.							
114 WEST 26TH STREET NEW YORK, NY 10001	11-3301957	501(C)(3)	8,000.				GRANTS FROM DAF AND
(7) HADASSAH THE WOMEN ZIONIST ORG							
50 W. 58TH STREET NEW YORK, NY 10019	13-1656651	501(C)(3)	17,609.				GRANTS FROM DAF AND
(8) HAR SHALOM CONGREGATION							
11510 FALLS ROAD POTOMAC, MD 20854	52-0824914	501(C)(3)	9,000.				JEWISH EDUCATION SUP
(9) HEBREW IMMIGRANT AID SOCIETY							
333 SEVENTH AVENUE NEW YORK, NY 10001	13-5633307	501(C)(3)	38,003.				GRANTS FROM DAF AND
(10) HENRY SCHEIN CARES FOUNDATION							
MAIL ROUTE E-310 MELVILLE, NY 11747	26-4137268	501(C)(3)	72,000.				GRANTS FROM DAF AND
(11) HILLEL SCHUSTERMAN INTERNATIONAL CENTER	_						
800 EIGHTH STREET NW WASHINGTON, DC 20001	11-3285824	501(C)(3)	15,000.				GRANTS FROM DAF AND
(12) HILLEL AT BARUCH COLLEGE							
55 LEXINGTON AVE. NEW YORK, NY 10010	20-4777751	501(C)(3)	15,000.				GRANTS FROM DAF AND

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

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

Schedule I (Form 990) (2014)

SCHEDULE I (Form 990)		OMB No. 1545-0047						
Internal Revenue Service	Informat	tion about Se	chedule I (Form	n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization TH	HE JEWISH FEDERA	TION OF G	REATER				Employer identificat	ion number
WASHINGTON, INC.							53-021244	5
Part I General Inform	mation on Grants and	d Assistanc	е					
	n maintain records to su used to award the grants		•				s or assistance, and	X Yes No
	e organization's proced							
Part II Grants and Ot	ther Assistance to D 1, for any recipient th	omestic Or	ganizations ar	nd Domestic Gov	ernments. Com	(f) Method of valuation		(h) Purpose of grant
or govern	iment	(*) =	if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) HILLEL THE FOUNDATION	FOR JEWISH CAMPUS LIF							
55 LEXINGTON AVENUE NE		20-4777751	501(C)(3)	15,000.				GRANTS FROM DAF AND
(2) HILLEL THE FOUNDATION	FOR JEWISH CAMPUS LIF							
1100 STANFORD DRIVE CO		52-1758796	501(C)(3)	5,170.				GRANTS FROM DAF AND
(3) HONEYMOON ISRAEL								
6070 WHITEGATE XING EA	ST AMHERST. NY 14051	47-1291052	501(C)(3)	146,000.				GRANTS FROM DAF AND
(4) HOPE FOR HENRY FOUNDAT								
2300 WISCONSIN AVENUE,		20-0244173	501(C)(3)	15,420.				GRANTS FROM DAF AND
(5) INTERFAITHFAMILY DC								
90 OAK STREET NEWTON,	MA 02464	04-3577816	501(C)(3)	170,000.				COMMUNAL SUPPORT
(6) ISRAEL EMERGENCY ALLIA				,				
6505 WILSHIRE BLVD LOS		01-0566033	501(C)(3)	70,000.				GRANTS FROM DAF AND
(7) ISRAEL EMERGENCY ALLIA								
PO BOX 341069 LOS ANGE		01-0566033	501(C)(3)	35,000.				GRANTS FROM DAF AND
(8) J STREET EDUCATION FUN								
1828 L ST NW, SUITE 24		20-2777557	501(C)(3)	11,000.				GRANTS FROM DAF AND
(9) JCC OF GREATER WASHING								
6125 MONTROSE ROAD ROC	KVILLE, MD 20852	53-0205921	501(C)(3)	67,866.				GRANTS FROM DAF AND
(10) JCRC OF GREATER WASHIN								
6101 EXECUTIVE BLVD RO		52-0214465	501(C)(3)	59,954.				GRANTS FROM DAF AND
(11) JEWISH ASSOCIATION FOR								
21160 95TH AVENUE SOUT		65-1131701	501(C)(3)	35,000.				GRANTS FROM DAF AND
(12) JEWISH COALITION AGAIN								
133 ROLLINS AVENUE ROC		52-2259318	501(C)(3)	49,021.				COMMUNAL SUPPORT
	of section 501(c)(3) and				able	ı I	•	
	of other organizations li	-	-					
For Paperwork Reduction Act							Sc	hedule I (Form 990) (2014)
JSA								
00/1								

4E1288 1.000 1378IT 701M

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Attach to Form 990. Department of the Treasury Internal Revenue Service Open to Public Inspection Name of the organization THE JEWISH FEDERATION OF GREATER Employer identification number 53-0212445 Name of the organization on Grants and Assistance Employer identification number 53-0212445 Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of cash or government (f) Method of valuation (book, FM/, appraisal, other) (g) Description of or assistance (h) Purpose of grant or assistance 1 (a) Name and address of organization or government (b) EIN (c) RC section grant (d) Amount of cash grant (e) Amount of non- cash assistance (f) Method of valuation (book, FM/, ap
Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization THE JEWISH FEDERATION OF GREATER Employer identification number 53-0212445 WASHINGTON, INC. 53-0212445 Part1 General Information on Grants and Assistance 53-0212445 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. X Yes No Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (bok, FMV, apraisal, or government (g) Description of non-cash assistance (h) Purpose of grant or assistance (1) JEWISH COMMUNITY CENTER OF GREATER WASHINGT (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non- cash assistance (f) Method of valuation non-cash assistance (h) Purpose of grant or assistance
WASHINGTON, INC. 53-0212445 Part1 General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part1II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance or assistance (h) Purpose of grant or assistance (1) JEWISH COMMUNITY CENTER OF GREATER WASHINGT Image: Community of the senter
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Image: Complete in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (1) JEWISH COMMUNITY CENTER OF GREATER WASHINGT (b) EIN (c) IRC section if applicable (d) Amount of cash grant (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance
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2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (1) JEWISH COMMUNITY CENTER OF GREATER WASHINGT (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (h) Purpose of grant or assistance (1) JEWISH COMMUNITY CENTER OF GREATER WASHINGT Image: Community of the section of the sectin of the section of the section of the sectio
or government trif applicable grant cash assistance (look, rwv, applaisal, other) non-cash assistance or assistance (1) JEWISH COMMUNITY CENTER OF GREATER WASHINGT Image: cash assistance Image: cash assist
6125 MONTROSE ROAD ROCKVILLE, MD 20852 53-0205921 501(C)(3) 750,687.
(2) JEWISH COMMUNITY CENTER OF GREATER WASHINGT
6125 MONTROSE RD. ROCKVILLE, MD 20852 53-0205921 501(C)(3) 57,981.
(3) JEWISH COMMUNITY CENTER OF NORTHERN VIRGINI
8900 LITTLE RIVER TURNPIKE 54-1145849 501(C)(3) 41,514. GRANTS FROM DAF AND
(4) JEWISH COMMUNITY CENTER OF NORTHERN VIRGINI
8900 LITTLE RIVER TURNPIKE 54-1145849 501(C)(3) 441,569.
(5) JEWISH COMMUNITY RELATIONS COUNCIL
6101 EXECUTIVE BLVD ROCKVILLE, MD 20852 52-0214465 501(C)(3) 587,405.
(6) JEWISH COUNCIL FOR THE AGING
11820 PARKLAWN DRIVE, SUITE 200 52-0983740 501(C)(3) 298,159.
(7) JEWISH COUNCIL FOR THE AGING OF GREATER WAS
12320 PARKLAWN DRIVE ROCKVILLE, MD 20852 52-0983740 501(C)(3) 112,034.
(8) JEWISH EXPERIENCE MADISON
233 LANGDON STREET MADISON, WI 53703 20-2142497 501(C)(3) 8,000. GRANTS FROM DAF AND
(9) JEWISH FAMILY & COMMUNITY SERVICES OF SW FL
5025 CASTELLO DRIVE NAPLES, FL 34103 45-3980909 501(C)(3) 10,000. GRANTS FROM DAF AND
(10) JEWISH FEDERATION OF NORTH AMERICA
25 BROADWAY, SUITE 1700 NEW YORK, NY 10004 13-1624240 501(C)(3) 4,087,380.
(11) JEWISH FEDERATION OF PALM BEACH COUNTY
4601 COMMUNITY DRIVE 59-0948696 501(C)(3) 25,600. GRANTS FROM DAF AND
(12) JEWISH FEDERATION OF SOUTH PALM BEACH COUNT
9901 DONNA KLEIN BOULEVARD 59-1945109 501(C)(3) 6,000. GRANTS FROM DAF AND
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2014)
JSA

SCHEDULE I (Form 990) Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.							омв №. 1545-0047 20 14
			tach to Form 990.	orm 550, r art rv,			Open to Public
Department of the Treasury Internal Revenue Service	ormation about So	chedule I (Form	990) and its instr	uctions is at www	v.irs.aov/form990.		Inspection
Name of the organization THE JEWISH FED					g	Employer identificat	
WASHINGTON, INC.						53-021244	
Part I General Information on Grants	s and Assistance	9				33 021211	,
1 Does the organization maintain records			e grants or assista	nce the grantees	' eligibility for the grant	s or assistance and	
the selection criteria used to award the		0					X Yes No
2 Describe in Part IV the organization's p			of grant funds in the	United States			
Part II Grants and Other Assistance Part IV, line 21, for any recipie	to Domestic Or	ganizations ar	nd Domestic Gov	ernments. Com	additional space is r		es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JEWISH FEDERATIONS OF NORTH AMERICA							
25 BROADWAY NEW YORK, NY 10004	13-1624240	501(C)(3)	551,528.				GRANTS FROM DAF AND
(2) JEWISH FOUNDATION FOR GROUP HOMES							
1500 EAST JEFFERSON STREET	52-1263608	501(C)(3)	110,180.				GRANTS FROM DAF AND
(3) JEWISH FOUNDATION FOR GROUP HOMES							
1500 EAST JEFFERSON STREET	52-1263608	501(C)(3)	190,923.				COMMUNAL SUPPORT
(4) JEWISH HISTORICAL SOCIETY OF GREATER WAS	SHIN						
701 4TH STREET NW, STE 200	52-6064549	501(C)(3)	17,622.				COMMUNAL SUPPORT
(5) JEWISH HISTORICAL SOCIETY OF GREATER WAS	SHIN						
701 4TH STREET NW SUITE 200	52-6064549	501(C)(3)	24,585.				GRANTS FROM DAF AND
(6) JEWISH OUTREACH INSTITUTE							
1270 BROADWAY NEW YORK, NY 10117	42-1317696	501(C)(3)	7,500.				GRANTS FROM DAF AND
(7) JEWISH PHILANTHROPIC FUND OF 1933, INC.							
15 W 16TH STREET NEW YORK, NY 10011	13-6120002	501(C)(3)	100,000.				GRANTS FROM DAF AND
(8) JEWISH PRIMARY DAY SCHOOL OF NAT. CAP.							
6045 16TH STREET WASHINGTON, DC 20011	52-2115715	501(C)(3)	133,453.				COMMUNAL SUPPORT
(9) JEWISH RECORDS INDEXING - POLAND, INC.							
5607 GREENLEAF ROAD CHEVERLY, MD 20785	52-2101869	501(C)(3)	7,455.				GRANTS FROM DAF AND
(10) JEWISH ROCKVILLE OUTREACH CONGREGATION							
11304 OLD GEORGETOWN ROAD	20-4960168	501(C)(3)	6,000.				GRANTS FROM DAF AND
(11) JEWISH SOCIAL SERVICE AGENCY							
6123 MONTROSE ROAD ROCKVILLE, MD 20852	53-0196598	501(C)(3)	557,333.				GRANTS FROM DAF AND
(12) JEWISH SOCIAL SERVICE AGENCY							
6123 MONTROSE ROAD ROCKVILLE, MD 20852	53-0196598	501(C)(3)	935,986.				COMMUNAL SUPPORT
2 Enter total number of section 501(c)(3				able			
3 Enter total number of other organizati	ons listed in the lir	ne 1 table	<u></u>	<u> </u>	<u></u>	<u></u>	
For Paperwork Reduction Act Notice, see the Ins						Sc	hedule I (Form 990) (2014)
JSA							

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SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.								
Department of the Treasury			tach to Form 990.				Open to Public	
Internal Revenue Service	ation about S	chedule I (Forn	n 990) and its inst	ructions is at www	v.irs.gov/form990.		Inspection	
Name of the organization THE JEWISH FEDER	ATION OF C	GREATER				Employer identificat		
WASHINGTON, INC.						53-0212445	5	
Part I General Information on Grants a		-						
 Does the organization maintain records to the selection criteria used to award the graning Describe in Part IV the organization's processing 	nts or assistand edures for mor	ce? nitoring the use	of grant funds in th	e United States.			X Yes No	
Part II Grants and Other Assistance to Part IV, line 21, for any recipient					additional space is		es" to Form 990,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) JEWISH TELEGRAPHIC AGENCY								
24 WEST 30TH STREET NEW YORK, NY 10001	13-0887610	501(C)(3)	5,100.				GRANTS FROM DAF AND	
(2) JEWISH THEOLOGICAL SEMINARY								
3080 BROADWAY NEW YORK, NY 10027	13-0887640	501(C)(3)	6,775.				GRANTS FROM DAF AND	
(3) JEWISH UNITED FUND								
30 SOUTH WELLS STREET CHICAGO, IL 60606	36-2167034	501(C)(3)	11,682.				GRANTS FROM DAF AND	
(4) JEWISH WOMEN INTERNATIONAL								
1129 20TH STREET NW WASHINGTON, DC 20036	52-6040461	501(C)(3)	22,618.				GRANTS FROM DAF AND	
(5) JEWISH WOMEN'S RENAISSANCE PROJECT								
6101 EXECUTIVE BLVD, SUITE 390	38-3852989	501(C)(3)	20,000.				GRANTS FROM DAF AND	
(6) JEWS UNITED FOR JUSTICE, INC.								
1100 H STREET NW, SUITE 630	52-2346578	501(C)(3)	41,360.				GRANTS FROM DAF AND	
(7) JOHNS HOPKINS UNIVERSITY								
100 N. CHARLES ST. SUITE 316	52-0595110	501(C)(3)	10,500.				GRANTS FROM DAF AND	
(8) KEMP MILL SYNAGOGUE								
11910 KEMP MILL ROAD	52-1664121	501(C)(3)	9,300.				GRANTS FROM DAF AND	
(9) KENYON COLLEGE								
209 CHASE AVE GAMBIER, OH 43022	31-4379507	501(C)(3)	25,000.				GRANTS FROM DAF AND	
(10) KESHER ISRAEL CONGREGATION								
2801 N STREET N.W. WASHINGTON, DC 20007	52-1316406	501(C)(3)	10,000.				GRANTS FROM DAF AND	
(11) KESHET								
284 AMORY STREET JAMAICA PLAIN, MA 02130	48-1278664	501(C)(3)	10,000.				GRANTS FROM DAF AND	
(12) KOL SHALOM	_							
9110 DARNESTOWN ROAD ROCKVILLE, MD 20850		501(C)(3)	15,000.				GRANTS FROM DAF AND	
2 Enter total number of section 501(c)(3) a	-	-						
3 Enter total number of other organizations	listed in the li	ne 1 table	<u></u> .		<u></u> .	<u> </u>		

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

Schedule I (Form 990) (2014)

				• ·		I	OND No. 4545 0047
SCHEDULE I			Assistance t	-	•		OMB No. 1545-0047
		nts, and li			2014		
	implete if the o	-	swered "Yes" to F tach to Form 990.	orm 990, Part IV,	line 21 of 22.		Open to Public
Department of the Treasury Internal Revenue Service	nation about S	,		uctions is at www	w.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FEDE					w.ii 3.gov/101111330.	Employer identification	
WASHINGTON, INC.	KAIION OF C	JKEALEK				53-021244	
Part I General Information on Grants	and Assistanc	0				55-021244	5
1 Does the organization maintain records to			arante or accieta	and the grantage	l aligibility for the grapt	c or accietance, and	
 a Does the organization maintain records to the selection criteria used to award the gr a Describe in Part IV the organization's pro- 	ants or assistand	ce?					X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipien							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) KOLLEL VILNA							
3299 K STREET, NW WASHINGTON, DC 20007	30-6059369	501(C)(3)	7,500.				GRANTS FROM DAF AND
(2) LOW VISION CENTER							
4905 DEL RAY AVENUE BETHESDA, MD 20814	52-1155044	501(C)(3)	50,000.				GRANTS FROM DAF AND
(3) MASSACHUSETTS INSTITUTE OF TECHNOLOGY							
600 MEMORIAL DRIVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	25,000.				GRANTS FROM DAF AND
(4) MELVIN J. BERMAN HEBREW ACADEMY							
13300 ARCTIC AVENUE ROCKVILLE, MD 20853	53-0208371	501(C)(3)	323,934.				COMMUNAL SUPPORT
(5) MELVIN J. BERMAN HEBREW ACADEMY							
13300 ARCTIC AVENUE ROCKVILLE, MD 20853	53-0208371	501(C)(3)	32,279.				GRANTS FROM DAF AND
(6) MESORAH DC FOR YOUNG PROFESSIONALS							
10612 WOODSDALE DRIVE	13-4251165	501(C)(3)	17,500.				GRANTS FROM DAF AND
(7) MESORAH INC							
10717 MEADOWHILL RD SILVER SPRING, MD 2090	1 13-4251165	501(C)(3)	9,800.				GRANTS FROM DAF AND
(8) MID-ATLANTIC INNOCENCE PROJECT							
2000 H STREET, NW WASHINGTON, DC 20052	54-1993334	501(C)(3)	10,000.				GRANTS FROM DAF AND
(9) MIDDLE EAST MEDIA AND RESEARCH INSTITUTE							
1819 L ST., NW WASHINGTON, DC 20036	52-2068483	501(C)(3)	40,000.				GRANTS FROM DAF AND
(10) MIRIAM'S KITCHEN							
2401 VIRGINIA AVENUE NW	52-1331552	501(C)(3)	8,500.				GRANTS FROM DAF AND
(11) NATIONAL PHILHARMONIC							
5301 TUCKERMAN LANE	52-1361650	501(C)(3)	18,500.				GRANTS FROM DAF AND

	SUI IUCKERMAN LANE	52-1301050	501(C)(3)	10,500.				GRANIS FROM DAF AND			
(12) 🛚	ICSY- ATLANTIC SEABOARD										
4	001 CLARKS LANE BALTIMORE, MD 21215	13-5623717	501(C)(3)	30,360.				GRANTS FROM DAF AND			
2	2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table										
3	Enter total number of other organizations li										

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Schedule I (Form 990) (2014)

SCHEDULE I								OMB No. 1545-0047
(Form 990)			•					2014
	Com	plete if the o	-		orm 990, Part IV,	line 21 of 22.		Open to Public
Department of the Treasury	► Informa	tion about S	,		uctions is at www	v irs aov/form990		
							Employer identificat	
WASHINGTON, INC.								
	on on Grants an	d Assistanc	e				33 021211	<u>-</u>
the selection criteria used 2 Describe in Part IV the org	m 990) Covernments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. NATACH to Form 990, Part IV, line 21 or 22. NATACH to Form 990, Part IV, line 21 or 22. Complete if the organization about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. of the organization THE JEWISH FEDERATION OF GREATER Employer identification number 53-0212445 TINTOTON, IT Concernal Information on Grants and Assistance S3-0212445 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection circleria used to award the grants or assistance?,							
Part IV, line 21, for	r any recipient tl	hat received	more than \$5	,000. Part II can I	be duplicated if a	(f) Method of valuation	needed.	
		()				(book, FMV, appraisal, other)		
(1) NCSY SUMMER PROGRAMS								
11 BROADWAY NEW YORK, NY 10	0004	13-5623717	501(C)(3)	37,350.				GRANTS FROM DAF AND
(2) NEW ISRAEL FUND								
6 E. 39TH ST. #301 NEW YORK	C, NY 10016	94-2607722	501(C)(3)	18,050.				GRANTS FROM DAF AND
(3) NEW ISRAEL FUND								
2100 M STREET, NW #619 WASH	HINGTON, DC 20037	94-2607722	501(C)(3)	6,600.				GRANTS FROM DAF AND
(4) NFTY								
46 BOWEN ROAD WARWICK, NY 1	.0990	13-1663143	501(C)(3)	16,650.				GRANTS FROM DAF AND
(5) NA FOUNDATION UNIV OF MANCE	IESTER	_						
16 MULBERRY CIR AYER, MA 01	432	31-1598015	501(C)(3)	15,180.				GRANTS FROM DAF AND
(6) OHR DAVID OUTREACH		_						
326 KINGSTON AVENUE BROOKLY	YN, NY 11213	25-1702526	501(C)(3)	6,000.				GRANTS FROM DAF AND
(7) OHR KODESH CONGREGATION		_						
8300 MEADOWBROOK DRIVE		52-0613672	501(C)(3)	7,500.				COMMUNAL SUPPORT
(8) ORT AMERICA, INC		_						
75 MAIDEN LANE TENTH FLOOR		13-5562969	501(C)(3)	13,392.				GRANTS FROM DAF AND
(9) P.E.F. ISRAEL ENDOWMENT FUN	NDS INC.	_						
630 THIRD AVENUE NEW YORK,	NY 10017	13-6104086	501(C)(3)	146,185.				GRANTS FROM DAF AND
(10) PARKINSON'S ACTION NETWORK	FOUNDATION	_						
1025 VERMONT AVENUE NW WASH	HINGTON, DC 20005	94-3172675	501(C)(3)	15,000.				GRANTS FROM DAF AND
(11) PRO MUSICA HEBRAICA								

(12)	PROJECT INTERCHANGE INSTITUTE OF AJC						
	1156 15TH ST. NW WASHINGTON, DC 20005	52-1576358	501(C)(3)	11,267.			GRANTS FROM DAF AND
2	Enter total number of section 501(c)(3) and	l governmen	t organizations	isted in the line 1 ta	able	 	
3	Enter total number of other organizations list	sted in the lir	ne 1 table			 	

107,500.

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1225 19TH STREET, NW WASHINGTON, DC 20036

Schedule I (Form 990) (2014)

GRANTS FROM DAF AND

20-0201189 501(C)(3)

			Assistance t	-	•		OMB No. 1545-0047
		•	ndividuals i				2014
Cor	nplete if the o		swered "Yes" to F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury		► At	tach to Form 990.				Open to Public
			n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FEDER	ATION OF G	REATER				Employer identificat	tion number
WASHINGTON, INC.						53-0212445	5
Part I General Information on Grants a	nd Assistanc	е					
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's proce 	nts or assistand edures for mor	e? hitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) REGINALD S LOURIE CFIAYC							
12301 ACADEMY WAY ROCKVILLE, MD 20852	52-1255870	501(C)(3)	10,776.				GRANTS FROM DAF AND
(2) ROUND HOUSE THEATRE, INC.							
7501 WISCONSIN AVENUE BETHESDA, MD 20814	52-1289737	501(C)(3)	62,070.				GRANTS FROM DAF AND
(3) SAVE A CHILD'S HEART FOUNDATION, US INC.							
10050 CHAPEL ROAD POTOMAC, MD 20854	52-1783323	501(C)(3)	11,706.				GRANTS FROM DAF AND
(4) SETON HALL UNIVERSITY							
400 SOUTH ORANGE AVENUE	22-1500645	501(C)(3)	25,000.				GRANTS FROM DAF AND
(5) SIBLEY MEMORIAL HOSPITAL FOUNDATION							
5255 LOUGHBORO ROAD WASHINGTON, DC 20016	45-0562642	501(C)(3)	30,830.				GRANTS FROM DAF AND
(6) SIDWELL FRIENDS SCHOOL							
3825 WISCONSIN AVENUE, NW	53-0196519	501(C)(3)	6,000.				GRANTS FROM DAF AND
(7) SIXTH AND I SYNAGOGUE, INC							
600 I STREET NW WASHINGTON, DC 20001	33-1036146	501(C)(3)	6,950.				GRANTS FROM DAF AND
(8) SO WHAT ELSE							
ONE PRESERVE PKYWY ROCKVILLE, MD 20852	27-1219231	501(C)(3)	40,000.				GRANTS FROM DAF AND
(9) SPECIAL OLYMPICS INC.							
1133 19TH ST, N.W. WASHINGTON, DC 20036	52-0889518	501(C)(3)	10,000.				GRANTS FROM DAF AND
(10) SULAM, INC.							
13300 ARCTIC AVENUE ROCKVILLE, MD 20853	52-2105076	501(C)(3)	5,100.				GRANTS FROM DAF AND
(11) SUNFLOWER BAKERY							
8507 ZIGGY LANE GAITHERSBURG, MD 20877	26-2797556	501(C)(3)	22,250.				GRANTS FROM DAF AND
(12) TAHIRIH JUSTICE CENTER							
6402 ARLINGTON BLVD FALLS CHURCH, VA 22042	54-1858176	501(C)(3)	11,000.				GRANTS FROM DAF AND

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2014)

			Assistance t				OMB No. 1545-0047
(Form 990) Ge	overnme	nts, and Ir	ndividuals ir	n the Unite	d States		2014
Con	plete if the o	rganization ans	swered "Yes" to F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury		► At	tach to Form 990.				Open to Public
Internal Revenue Service	ation about S	chedule I (Form	n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FEDER	ATION OF C	REATER				Employer identificat	ion number
WASHINGTON, INC.						53-0212445	5
Part I General Information on Grants ar							
1 Does the organization maintain records to s			e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the grar							X Yes No
2 Describe in Part IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient							es" to Form 990,
		1			(f) Method of valuation		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TEMPLE B'NAI ABRAHAM							
300 EAST NORTHFIELD ROAD	22-1515224	501(C)(3)	42,000.				GRANTS FROM DAF AND
(2) TEMPLE SINAI							
3100 MILITARY ROAD WASHINGTON, DC 20015	53-0231513	501(C)(3)	10,000.				JEWISH EDUCATION SU
(3) TEMPLE SINAI							
3100 MILITARY ROAD NW WASHINGTON, DC 20015	53-0231513	501(C)(3)	5,047.				GRANTS FROM DAF AND
(4) THE AMERICAN JEWISH JOINT DISTRIBUTION							
711 3rd avenue, tenth floor	13-1656634	501(C)(3)	145,000.				GRANTS FROM DAF AND
(5) THE ESPERANZA EDUCATION FUND							
PO BOX 27507 WASHINGTON, DC 27507	26-4035461	501(C)(3)	15,000.				GRANTS FROM DAF AND
(6) THE GOOD PEOPLE FUND	_						
384 WYOMING AVENUE MILLBURN,, NJ 07041	26-1887249	501(C)(3)	15,350.				GRANTS FROM DAF AND
(7) THE ISRAEL PROJECT	_						
1901 PENNSYLVANIA AVENUE NW	37-1472882	501(C)(3)	22,600.				GRANTS FROM DAF AND
(8) THE JERUSALEM FOUNDATION							
420 LEXINGTON AVENUE NEW YORK, NY 19170	13-2583745	501(C)(3)	10,000.				GRANTS FROM DAF AND
(9) THE JEWISH NATIONAL FUND	_						
2 RESERVOIR CIRCLE #203	13-1659627	501(C)(3)	21,208.				GRANTS FROM DAF AND
(10) THE JOHN F. KENNEDY CENTER FOR THE PERFORMI							
2700 F ST. NW WASHINGTON, DC 20566	53-0245017	501(C)(3)	78,517.				GRANTS FROM DAF AND
(11) THE NVCC EDUCATIONAL FOUNDATION							
7630 LITTLE RIVER TURNPIKE	54-1284258	501(C)(3)	10,000.				GRANTS FROM DAF AND
(12) THE RESOURCE FOUNDATION							
237 WEST 35TH STREET SUITE 1203 2 Enter total number of section 501(c)(3) and	13-3421446		<u>19,750.</u>				GRANTS FROM DAF AND

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

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Schedule I (Form 990) (2014)

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	Grants al Governme complete if the o	rganization ans		OMB No. 1545-0047			
Department of the Treasury		,	tach to Form 990.				Open to Public Inspection
		-	n 990) and its instr	uctions is at www	w.irs.gov/torm990.	Employer identifiert	
Name of the organization THE JEWISH FED	ERATION OF G	REATER				Employer identificat	
WASHINGTON, INC.	and Assistance	•				53-0212445)
Part I General Information on Grants						•	
 Does the organization maintain records the selection criteria used to award the g Describe in Part IV the organization's pro- 	rants or assistanc	e?			eligibility for the grant	s or assistance, and	X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipie	o Domestic Or	ganizations a	nd Domestic Gov	ernments. Com			es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE WOMENS LAW CENTER OF MARYLAND, INC.							
305 WEST CHESAPEAKE AVENUE TOWSON, MD 21:	204 52-1238912	501(C)(3)	70,000.				GRANTS FROM DAF AND
(2) TORAH SCHOOL OF GREATER WASHINGTON							
2010 LINDEN LANE SILVER SPRING, MD 20910	52-1874788	501(C)(3)	150,879.				COMMUNAL SUPPORT
(3) TRUSTEES OF THE UNIVERSITY OF PENNSYLVAN	IA						
3451 WALNUT STREET, ROOM 433	23-1352685	501(C)(3)	24,587.				GRANTS FROM DAF AND
(4) UNITED STATES HOLOCAUST MEMORIAL MUSEUM							
100 RAOUL WALLENBERG PLACE SW	52-1309391	501(C)(3)	73,860.				GRANTS FROM DAF AND
(5) UNITED SYNAGOGUE YOUTH							
820 SECOND AVENUE NEW YORK, NY 10017	13-1659707	501(C)(3)	5,550.				GRANTS FROM DAF AND
(6) UNIVERSITY OF HARTFORD							
200 BLOOMFIELD AVENUE	06-0731360	501(C)(3)	10,000.				GRANTS FROM DAF AND
(7) UNIVERSITY OF MARYLAND FOUNDATION FOR JEV	WIS						
7612 MOWATT LANE COLLEGE PARK, MD 20740	52-0749507	501(C)(3)	36,655.				JEWISH EDUCATION SU
(8) UNIVERSITY OF MARYLAND COLLEGE PARK FOUND							
1109 LEE BUILDING COLLEGE PARK, MD 20742	52-2197313	501(C)(3)	33,000.				GRANTS FROM DAF AND
(9) UNIVERSITY OF MARYLAND COLLEGE PARK FOUND							
1120 FRANCIS SCOTT KEY HALL	52-2197313	501(C)(3)	10,500.				GRANTS FROM DAF AND
(10) UNIVERSITY OF MARYLAND HILLEL							
7612 MOWATT LANE COLLEGE PARK, MD 20740	52-0749507	501(C)(3)	40,213.				GRANTS FROM DAF AND
(11) UNIVERSITY OF ROCHESTER	52 07 19 50 7	501(0)(0)	10,110.				
910 GENESEE STREET ROCHESTER, NY 14611	16-0743209	501(C)(3)	25,000.				GRANTS FROM DAF AND
(12) UNIVERSITY OF VIRGINIA JEWISH CENTER	10 0/15205		25,000.				AND THOM DIE AND
1824 UNIVERSITY CIRCLE	54-6061871	501(C)(3)	16,800.				JEWISH EDUCATION SUP
2 Enter total number of section 501(c)(3				able	1	•	DINION BOOCKITON SU
3 Enter total number of other organization	-	-				•••••	
For Paperwork Reduction Act Notice, see the Inst					<u> </u>	<u></u>	hadula (Farm 000) (2011)
JSA						50	hedule I (Form 990) (2014)

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SCHEDULE I		Grants a	nd Other A	Assistance t	o Organiza	tions.	L	OMB No. 1545-0047
(Form 990)	Go	overnme	n ts, and Ir	ndividuals in swered "Yes" to F tach to Form 990.	n the United	d States		20 14 Open to Public
Department of the Treasury Internal Revenue Service	Informa	tion about So		990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization	THE JEWISH FEDERA						Employer identificati	on number
WASHINGTON, INC.							53-0212445	
Part I General In	formation on Grants an	d Assistanc	e					
the selection crite 2 Describe in Part I	ation maintain records to s ria used to award the grant V the organization's proce d Other Assistance to D	ts or assistand dures for mor	e? hitoring the use	of grant funds in the	e United States.			X Yes No
Part IV, line	ddress of organization							(h) Purpose of grant
or go	overnment		if applicable	grant	cash assistance	other)	non-cash assistance	or assistance
(1) VIRGINIA TECH - HI	LLEL							
P.O. BOX 708 BLACK	SBURG, VA 24063	90-0406012	501(C)(3)	16,800.				JEWISH EDUCATION SU
(2) WASHINGTON D.C. JE	WISH COMMUNITY CENTER	_						
1529 16TH STREET, 1	NW WASHINGTON, DC 20036	52-1398151	501(C)(3)	387,556.				COMMUNAL SUPPORT
(3) WASHINGTON HEBREW	CONGREGATION	_						
3935 MACOMB STREET	NW WASHINGTON, DC 20016	53-0196646	501(C)(3)	22,705.				GRANTS FROM DAF ANI
(4) WASHINGTON INSTITU	TE FOR NEAR EAST POLICY	_						
1828 L STREET, NW	WASHINGTON, DC 20036	52-1376034	501(C)(3)	10,000.				GRANTS FROM DAF ANI
(5) WASHINGTON PERFORM	ING ARTS SOCIETY	_						
2000 L STREET, NW	WASHINGTON, DC 20036	52-6062439	501(C)(3)	10,174.				GRANTS FROM DAF ANI
(6) WASHINGTON UNIVERS	ITY	_						
1 DDOOKTNOG DD GA	INT LOUIS, MO 63130	43-0653611	501(C)(3)	50,000.				GRANTS FROM DAF ANI
I BROOKINGS DR. SA								
(7) WETA								
(7) WETA	UE ARLINGTON, VA 22206		501(C)(3)	29,235.				GRANTS FROM DAF ANI
(7) WETA	UE ARLINGTON, VA 22206		501(C)(3)	29,235.				GRANTS FROM DAF ANI
(7) WETA 3939 CAMPBELL AVEN	UE ARLINGTON, VA 22206 COMMUNITY	53-0242992	501(C)(3) 501(C)(3)	29,235. 6,879.				
(7) WETA3939 CAMPBELL AVEN(8) YACHAD THE JEWISH	UE ARLINGTON, VA 22206 COMMUNITY	53-0242992						
 (7) WETA 3939 CAMPBELL AVEN (8) YACHAD THE JEWISH (1666 CONNECTICUT A) (9) YALE UNIVERSITY 157 CHURCH ST. NEW 	UE ARLINGTON, VA 22206 COMMUNITY VENUE HAVEN, CT 06510	53-0242992 52-1698588						GRANTS FROM DAF ANI
 (7) WETA 3939 CAMPBELL AVEN (8) YACHAD THE JEWISH (1666 CONNECTICUT A) (9) YALE UNIVERSITY 157 CHURCH ST. NEW 	UE ARLINGTON, VA 22206 COMMUNITY VENUE HAVEN, CT 06510	53-0242992 52-1698588	501(C)(3) 501(C)(3)	6,879.				GRANTS FROM DAF ANI
 (7) WETA 3939 CAMPBELL AVEN (8) YACHAD THE JEWISH 1666 CONNECTICUT A (9) YALE UNIVERSITY 157 CHURCH ST. NEW (10) YESHIVA OF GREATER 2010 LINDEN LANE S 	UE ARLINGTON, VA 22206 COMMUNITY VENUE HAVEN, CT 06510 WASHINGTON ILVER SPRING, MD 20910	53-0242992 52-1698588	501(C)(3)	6,879.				GRANTS FROM DAF AND GRANTS FROM DAF AND GRANTS FROM DAF AND COMMUNAL SUPPORT
 (7) WETA 3939 CAMPBELL AVEN (8) YACHAD THE JEWISH 1666 CONNECTICUT A (9) YALE UNIVERSITY 157 CHURCH ST. NEW (10) YESHIVA OF GREATER 2010 LINDEN LANE S 	UE ARLINGTON, VA 22206 COMMUNITY VENUE HAVEN, CT 06510 WASHINGTON ILVER SPRING, MD 20910	53-0242992 52-1698588 06-0646973	501(C)(3) 501(C)(3)	6,879.				GRANTS FROM DAF AND
 (7) WETA 3939 CAMPBELL AVEN (8) YACHAD THE JEWISH 1666 CONNECTICUT A (9) YALE UNIVERSITY 157 CHURCH ST. NEW (10) YESHIVA OF GREATER 2010 LINDEN LANE S (11) YESHIVA OF GREATER 	UE ARLINGTON, VA 22206 COMMUNITY VENUE HAVEN, CT 06510 WASHINGTON ILVER SPRING, MD 20910	53-0242992 52-1698588 06-0646973	501(C)(3) 501(C)(3) 501(C)(3)	6,879.				GRANTS FROM DAF AND
 (7) WETA 3939 CAMPBELL AVEN (8) YACHAD THE JEWISH 1666 CONNECTICUT A (9) YALE UNIVERSITY 157 CHURCH ST. NEW (10) YESHIVA OF GREATER 2010 LINDEN LANE S (11) YESHIVA OF GREATER 	UE ARLINGTON, VA 22206 COMMUNITY VENUE HAVEN, CT 06510 WASHINGTON ILVER SPRING, MD 20910 WASHINGTON ILVER SPRING, MD 20910	53-0242992 52-1698588 06-0646973 52-1106842	501(C)(3) 501(C)(3) 501(C)(3)	6,879. 14,000. 80,714.				GRANTS FROM DAF ANI GRANTS FROM DAF ANI COMMUNAL SUPPORT

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Schedule I (Form 990) (2014)

JSA

SCHEDULE I (Form 990)	Governme	nts, and Ir	Assistance t ndividuals ir	n the United	d States		омв №. 1545-0047 20 14
Department of the Treasury	Complete il the o	-	tach to Form 990.	orm 990, Part IV,	ine 21 of 22.		Open to Public
Internal Revenue Service	ormation about So	hedule I (Form	n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization THE JEWISH FE	DERATION OF G	REATER				Employer identificati	on number
WASHINGTON, INC.						53-0212445	
Part I General Information on Grant	ts and Assistance	9					
1 Does the organization maintain records							
the selection criteria used to award the	grants or assistance	e?					X Yes No
2 Describe in Part IV the organization's p	procedures for mor	itoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance Part IV, line 21, for any recipi	e to Domestic Org	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Com be duplicated if a	additional space is	zation answered "Yo needed.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) YOUNG JUDAEA GLOBAL							
575 8TH AVENUE NEW YORK, NY 10018	45-2640858	501(C)(3)	15,000.				GRANTS FROM DAF AND
(2) YOUTH LEADERSHIP FOUNDATION							
5034 WISCONSIN AVENUE NW	52-2016259	501(C)(3)	29,000.				GRANTS FROM DAF AND
(3) ADAS ISRAEL CONGREGATION							
2850 QUEBEC STREET, NW WASHINGTON, DC 2	20008 53-0196563	501(C)(3)	102,548.				GRANTS FROM DAF AND
(4) ADAT SHALOM RECONSTRUCTIONIST							
7727 PERSIMMON TREE LANE BETHESDA, MD 2	20817 52-1763027	501(C)(3)	7,500.				COMMUNAL SUPPORT
(5) AISH INTERNATIONAL							
505 8TH AVENUE NEW YORK, NY 10018	11-3666684	501(C)(3)	10,000.				GRANTS FROM DAF END
(6) ADAT REYIM CONGREGATION							
6500 WESTBURY OAKS COURT	52-1301562	501(C)(3)	7,500.				COMMUNAL SUPPORT
_(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)((3) and governmen	t organizations	listed in the line 1 t	able		<u> </u> ⊾	210.

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	e this part to pro	vide the informa	Ition required in	Part I, line 2, Part III, c	column (b), and any other additional
information.			-	Part I, line 2, Part III, c	olumn (b), and any other additional
information. HEDUE I, PART I, LINE 2: THE JEWIS	TH FEDERATION	OF GREATER	WASHINGTON		olumn (b), and any other additional
information. HEDUE I, PART I, LINE 2: THE JEWIS	TH FEDERATION	OF GREATER	WASHINGTON ONE OR MORE		olumn (b), and any other additional
information. HEDUE I, PART I, LINE 2: THE JEWIS OVIDED GRANT FUNDING TO AGENCIES A FOUR AREAS OF SERVICE - HUMAN SER	TH FEDERATION	OF GREATER D BE USED IN PROMOTING JE	WASHINGTON ONE OR MORH WISH	E	olumn (b), and any other additional
information. HEDUE I, PART I, LINE 2: THE JEWIS OVIDED GRANT FUNDING TO AGENCIES A FOUR AREAS OF SERVICE - HUMAN SER JCATION, DEEPENING JEWISH ENGAGEME	TH FEDERATION AND SCHOOLS TO RVICE NEEDS, D RNT, AND STREE	OF GREATER D BE USED IN PROMOTING JE NGTHENING OR	WASHINGTON ONE OR MORH WISH GANIZATIONAI	2	olumn (b), and any other additional
information. HEDUE I, PART I, LINE 2: THE JEWIS OVIDED GRANT FUNDING TO AGENCIES A FOUR AREAS OF SERVICE - HUMAN SER JCATION, DEEPENING JEWISH ENGAGEME ERATIONS/CAPACITY. SOME GRANTS WER	TH FEDERATION AND SCHOOLS TO RVICE NEEDS, 1 ENT, AND STREE RE NOT PROGRAM	OF GREATER D BE USED IN PROMOTING JE NGTHENING OR M/SERVICE SP	WASHINGTON ONE OR MORH WISH GANIZATIONAI ECIFIC. EACH	2 	olumn (b), and any other additional
information. EDUE I, PART I, LINE 2: THE JEWIS VIDED GRANT FUNDING TO AGENCIES A FOUR AREAS OF SERVICE - HUMAN SER CATION, DEEPENING JEWISH ENGAGEME RATIONS/CAPACITY. SOME GRANTS WER NCY/SCHOOL PROVIDES THE FEDERATIO	TH FEDERATION AND SCHOOLS TO EVICE NEEDS, T ENT, AND STREE RE NOT PROGRAM	OF GREATER D BE USED IN PROMOTING JE NGTHENING OR M/SERVICE SP NUAL AUDIT,	WASHINGTON ONE OR MORH WISH GANIZATIONAI ECIFIC. EACH PROJECTED AN	I I I	olumn (b), and any other additional
information. EDUE I, PART I, LINE 2: THE JEWIS OVIDED GRANT FUNDING TO AGENCIES A FOUR AREAS OF SERVICE - HUMAN SER CATION, DEEPENING JEWISH ENGAGEME CRATIONS/CAPACITY. SOME GRANTS WER CNCY/SCHOOL PROVIDES THE FEDERATIO	TH FEDERATION AND SCHOOLS TO EVICE NEEDS, T ENT, AND STREE RE NOT PROGRAM	OF GREATER D BE USED IN PROMOTING JE NGTHENING OR M/SERVICE SP NUAL AUDIT,	WASHINGTON ONE OR MORH WISH GANIZATIONAI ECIFIC. EACH PROJECTED AN	I I I	olumn (b), and any other additional
information. HEDUE I, PART I, LINE 2: THE JEWIS OVIDED GRANT FUNDING TO AGENCIES A FOUR AREAS OF SERVICE - HUMAN SER JCATION, DEEPENING JEWISH ENGAGEME ERATIONS/CAPACITY. SOME GRANTS WER ENCY/SCHOOL PROVIDES THE FEDERATION TUAL FINANCIAL STATEMENTS AND QUAR	TH FEDERATION AND SCHOOLS TO RVICE NEEDS, I ENT, AND STREE RE NOT PROGRAM ON WITH AN AND TERLY FINANC	OF GREATER O BE USED IN PROMOTING JE NGTHENING OR M/SERVICE SP NUAL AUDIT, IAL REPORTS.	WASHINGTON ONE OR MORH WISH GANIZATIONAI ECIFIC. EACH PROJECTED AN PROFESSION	I I I	olumn (b), and any other additional
	TH FEDERATION AND SCHOOLS TO AND	OF GREATER D BE USED IN PROMOTING JE NGTHENING OR M/SERVICE SP NUAL AUDIT, IAL REPORTS. ARLY WITH GR	WASHINGTON ONE OR MORE WISH GANIZATIONAL ECIFIC. EACH PROJECTED AN PROFESSIONA	I I I	olumn (b), and any other additional

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
I					
2					
3					
4					
5					
3					
7					
art IV Supplemental Information. Completing information.	ete this part to pro	vide the informa	tion required in	Part I, line 2, Part III,	column (b), and any other additional

COMMITTEE OF THE FEDERATION.

SCH	EDULE J	Comper	sat	tion Information	OME	3 No. 1	545-0	047
(Fori	m 990)	For certain Officers, Dire	ctors	, Trustees, Key Employees, and Highest	Ĺ	ചെ	14	
					Ĺ	ZU		
	nent of the Treasury	▶ 4	Attack	n to Form 990.		en to		
	Revenue Service					Inspe		n
	Ū	P00) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees • Complete if the organization answered "Yes" on Form 990, Part IV, line 23. • Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. organization organization and					ſ	
Part				53-02	LZ445			
Fari	Question	is Regarding compensation					Yes	No
1a	Check the ap	propriate box(es) if the organization pro	ovide	d any of the following to or for a person listed in f	orm [103	
				•				
		•						
		• • • •		Personal services (e.g., maid, chauffeur, chef)				
		have an line to are checked did th						
b	or reimburse	ement or provision of all of the ex	pens	es described above? If "No." complete Part I	ll to			
	explain		• •		· ·	1b		
2	-							
	-				line			
					••	2		
3								
		•		· ·				
			\vdash					
	· ·	•						
		•						
4			Part	VII, Section A, line 1a, with respect to the filing				
а	•		avme	ent?		4a		Х
b			-			4b		X
с						4c		Х
	If "Yes" to an	y of lines 4a-c, list the persons and p	ovid	e the applicable amounts for each item in Part II	I. [
	-		-					
5	•		line	1a, did the organization pay or accrue any				
	•	6						
а						5a		X
b	-	-	• •		••	5b		X
~			1					
6	-		iine	ra, did the organization pay or accrue any				
•						60		x
a b	-					6a 6b		X
5			• •		•••	55		
7			۱A.	line 1a, did the organization provide any non-	fixed			
						7		x
8								
				ulations section 53.4958-4(a)(3)? If "Yes," des				1
		-	-			8		X
9				the rebuttable presumption procedure describe				
				<u></u>		9		
For Pa	aperwork Redu	ction Act Notice, see the Instructions for Fo	orm 9	90	Schedul	e J (Fo	rm 990	0) 2014

Schedule J (Form 990) 2014

Page **2**

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

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

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

		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
STEVEN A. RAKITT	(i)	420,491.	0	58,887.	12,875.	6,150.	498,403.	C
1 EXECUTIVE VICE PRESIDENT & CEO	(ii)	0	O	0	0	0	C	C
EILEEN FRAZIER	(i)	225,000.	9,000.	4,363.	11,747.	0	250,110.	C
2 CHIEF OPERATING OFFICER	(ii)	0	C	0	0	0	C	C C
AVITAL INGBER	(i)	210,000.	6,150.	1,999.	10,852.	6,073.	235,074.	C
3 CHIEF DEVELOPMENT OFFICER	(ii)	0	0	0	0	0	C	C C
VICKIE MARX	(i)	145,000.	5,800.	1,311.	7,572.	0	159,683.	C
4 CHIEF OF STAFF	(ii)	0	0	0	0	0	C	C C
STACYE N. ZEISLER	(i)	140,961.	4,200.	906.	7,289.	0	153,356.	C
5 CHIEF MARKETING OFFICER	(ii)	0	0	0	0	0	(0
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
_13	(ii)							
	(i)							
14	(ii)							
	(i)							
_15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Page 3

COLORADO EDUCATIONAL AND CULTURAL FACILITIES AUTH

SCHEDULE K (Form 990) Department of the Treasury	► Complete if		on answeree nations, ane ►	d "Yes" on I d any additi Attach to F	Form ional i form 9	990, Part IV, nformation ii 990.	line 24a. Pr n Part VI.	ovide desci	•				2(Open t	1545-00
Internal Revenue Service		tion about Sch		orm 990) and	d its ir	nstructions is	s at www.irs	s.gov/form9	90.		<u> </u>		Inspe	
Name of the organization	THE JEWISH FEDERATION	OF GREATER	5											n numbei
WASHINGTON, IN Part I Bond Iss											53-02	21244	45	
Part Bond Iss	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issue	ed	(e) Issue price	(f)	Description of p	ourpose	(g) D	efeased	bena	alf of	(i) Poole financir
										Yes	No	issu Yes		Yes I
A COLORADO EDUCATION	NAL AND CULTURAL FACILITIES AUTH	84-0896727		03/19/20	13	8,600,000	. ACQUIRE/CO	NSTRUCT OFF	ICE BUILDIN		x		x	:
В														
с														
D														
Part II Proceeds	5											11		I
						Α		В		C			D	
1 Amount of bond	ls retired	<u></u>												
	Is legally defeased													
3 Total proceeds	of issue					8,600,228	3.							
4 Gross proceeds	in reserve funds													
	rest from proceeds													
6 Proceeds in ref	unding escrows	<u></u>												
7 Issuance costs	from proceeds	<u></u>				116,668	3.							
8 Credit enhancer	ment from proceeds													
9 Working capital	expenditures from proceeds													
	tures from proceeds					8,471,021								
11 Other spent pro	ceeds					12,539	۶.							
12 Other unspent p	proceeds					0014								
13 Year of substan	tial completion	<u></u>				2014		Na	N a a			Vee	_	Nia
14 Ware the bonds	s issued as part of a current refundir				Yes	s No X	Yes	No	Yes	No)	Yes	5	No
	s issued as part of an advance refunding					X X								
	ocation of proceeds been made?					X								
	anization maintain adequate boo					A								
-	of proceeds?				Х									
Part III Private B	usiness Use													
						Α		В		с			D	
	ization a partner in a partnership				Yes		Yes	No	Yes	No	>	Yes		No
which owned pr	roperty financed by tax-exempt bon	ds?				X		_						
2 Are there any	lease arrangements that may	result in priva	te business	use of										
bond financed r	property?					Х		1						

THE JEWISH FEDERATION OF GREATER

53-0212445

Schedule K (F	orm 990) 2014								Page 2		
Part III	Private Business Use (Continued) CC	LORADO	EDUCATIO	NAL AND	CULTURA	L FACIL	ITIES AU	TH			
			Α		В		С		D		
	here any management or service contracts that may result in private as use of bond-financed property?	Yes	No X	Yes	No	Yes	No	Yes	No		
b If "Yes	" to line 3a, does the organization routinely engage bond counsel or other outside I to review any management or service contracts relating to the financed property?		x								
c Are t	nere any research agreements that may result in private business use of inanced property?		x								
d If "Ye	s" to line 3c, does the organization routinely engage bond counsel or other e counsel to review any research agreements relating to the financed property?										
	the percentage of financed property used in a private business use by entities than a section 501(c)(3) organization or a state or local government		%		%		%		%		
result	the percentage of financed property used in a private business use as a of unrelated trade or business activity carried on by your organization, er section 501(c)(3) organization, or a state or local government		%		%		%		%		
6 Total	of lines 4 and 5		%		%		%		%		
	the bond issue meet the private security or payment test?		Х								
	ere been a sale or disposition of any of the bond-financed property to a non- nmental person other than a 501(c)(3) organization since the bonds were issued? .		x								
	" to line 8a, enter the percentage of bond-financed property sold or sed of		%		%		%		%		
	" to line 8a, was any remedial action taken pursuant to Regulations ns 1.141-12 and 1.145-2?										
nonqu	e organization established written procedures to ensure that all alified bonds of the issue are remediated in accordance with the ements under Regulations sections 1.141-12 and 1.145-2?	x									
Part IV	Arbitrage								L		
			A	В		С		D			
	the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and y in Lieu of Arbitrage Rebate?	Yes	No X	Yes	No	Yes	No	Yes	No		
	to line 1, did the following apply?										
a Rebat	e not due yet?	X									
	tion to rebate?										
	pate due?										
lf "Ye	s" to line 2c, provide in Part VI the date the rebate computation was med.								1		
	bond issue a variable rate issue?	X									
4a Has	the organization or the governmental issuer entered into a qualified with respect to the bond issue?	x									
	of provider								l		
	of hedge.	PNC BANK,	NA 15.100								
d Wast	he hedge superintegrated?		X								
	he hedge terminated?		X								
104		1					Sc	hedule K (Fo	orm 990) 2014		

THE JEWISH FEDERATION OF GREATER

Schedule K (Form 990) 2014								Page 3
Part IV Arbitrage (Continued)								
	Α			В		С		D
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								1
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?	Х							
7 Has the organization established written procedures to monitor the								
requirements of section 148?	х							
Part V Procedures To Undertake Corrective Action	21							<u> </u>
		Α		В		C		D
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the	163	NO	163	NU	163	NO	163	
voluntary closing agreement program if self-remediation is not available under applicable regulations?	37							
	X				iana)			<u> </u>
Part VI Supplemental Information. Provide additional information for responses to	question	ons on Sche	equie K (se	e instruct	ions).			

Schedule K (Form 990) 2014

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

PART I, BOND ISSUES

(A) ISSUER NAME - COLORADO EDUCATIOINAL AND CULTURAL FACILITES AUTHORITY

(F) DESCRIPTION OF PURPOSE - ACQUIRE, CONSTRUCT, RENOVATE, EQUIP AND

FURNISH AN OFFICE BUILDING

PART II LINE 3 - INCLUDES INVESTMENT EARNINGS ON THE BONDS DURING

CONSTRUCTION OF THE PROJECT IN THE AMOUNT OF \$189.

PART IV LINE 6 - AFTER 13 MONTHS, LESS THAN \$13,000 OF PROCEEDS OF THE

BONDS REMAINED ON ACCOUNT IN THE COSTS OF ISSUANCE ACCOUNT. SUCH PROCEEDS

WERE HELD IN A MONEY MARKET FUND AND HAVE SINCE BEEN EXPENDED.

SCHEDULE L	Tra	ansactio	ons \	With	Interes	ted	Persons		I	OME	3 No. 1	545-00	47	
(Form 990 or 990-EZ) ► Co		rganization a 28b, or 280	nswere c, or Fo	ed "Yes orm 99		90, Par line 38	t IV, line 25a, 25b, 3a or 40b.	26, 27, 2	28a,		20 pen To	14 Public		
Department of the Treasury Internal Revenue Service	Information abou						ns is at www.irs.gov/f	orm990.			specti			
Name of the organization TH	E JEWISH	FEDERATIC	ON OF	' GRE	ATER		E	mployer	identif	ication	numbe	er		_
WASHINGTON, INC.								53	-021	2445	5			
							01(c)(29) organiz							
Complete if the c	organization a	nswered "Ye	s" on I	Form	990, Part IV	line 2	5a or 25b, or Forn	n 990-E	Z, Pa	rt V, li	ine 40	b		
1 (a) Name of disqualified person		(b) Relationship between disqualified person and organization					(c) Des	of trans	saction		Corre			
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
2 Enter the amount of t										•				
under section 4958										► \$_				
3 Enter the amount of t	ax, if any, on	line 2, above	, reim	burse	a by the orga	nizatioi	n		•••	▶ \$_				
Part I Loans to and/o	r From Intoro	etod Porcone												—
	organization a	answered "Ye	es" on				ne 38a or Form 99	90, Par	t IV, lir	ne 26;	or if t	he		
(a) Name of interested person	(b) Relationship with organization	(c) Purpose of Ioan	from	(d) Loan to or from the principal amount organization?		(f) Balance due	(g) In defau) Written reement?		
			То	From				Yes	No	Yes	No	Yes	N	0
(1) STEVEN RAKITT	CEO	RELOCATION		Х	75,	000.	75,000	•	Х	Х		X		
(2)	_													
(3)														
(4)														
(5)	_							_						
(6)														
(7)								_						
(8)														
(9) (10)														—
<u>(10)</u> Total							\$ 75,000)	<u> </u>					—
Part III Grants or Assis Complete if the					990, Part IV,		•							_
(a) Name of interested person		ip between intere the organization) Amou	nt of assistance		(d) Type of assistance		(e)) Purpo	se of as	sistance	e	
(1)														
(2)														_
(3)														_
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														

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

Schedule L (Form 990 or 990-EZ) 2014

Page 2

Schedule L (Form 990 or 990-EZ) 2014

Part IVBusiness Transactions Involving Interested Persons.Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	haring of ization's nues?	
				Yes	No	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

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

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS

(A) NAME OF PERSON: STEVEN RAKITT

(B) RELATIONSHIP WITH ORGANIZATION: EXECUTIVE VICE PRESIDENT AND CEO

(C) PURPOSE OF LOAN: TO PAY FOR RELOCATION EXPENSES

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2014

Open To Public

Inspection

Department of the Treasury	
Internal Revenue Service	

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

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

Name of the organization

THE JEWISH FEDERATION OF GREATER

Employer identification number 53-0212445

	HINGTON, INC.				53-0	212445			
Par	t Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributior amounts reported on Form 990, Part VIII, line		Method of cash cont			
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	240.	8,175,31	8. FMV				
10	Securities - Closely held stock								
11	Securities - Partnership, LLC,								
	or trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation								
	contribution - Historic								
	structures								
14	Qualified conservation								
	contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ►()								
26	Other ►()								
27	Other ►()								
	Other ►()								
29	Number of Forms 8283 received								1
	which the organization completed F	orm 8283,	Part IV, Donee Acknowledg	ement	29			Vee	1.
20-	During the year did the same is t	lan reaction	hu aaatsikutina amaa	why was a stand by Dent 1	line - 1 ·	hrout		Yes	No
30a	During the year, did the organizat					•			
	28, that it must hold for at least th						200		Х
	to be used for exempt purposes for		olaing perioa?				30a		
	If "Yes," describe the arrangement in		once policy that require	a the review of	w non ci	tondord			
31	Does the organization have a						31	Х	
22-	contributions? Does the organization hire or use						31	Δ	
з∠а	•		•	•			222		x
L	contributions?					• • • •	32a		Λ
	If "Yes," describe in Part II.	amount in	column (c) for a type of are	porty for which colum	n (a) in ch	bockod			
33	If the organization did not report ar describe in Part II.	i amount in	column (c) for a type of pro	perty for which colum	n (a) is ch	ieckea,			
	ausunde in Falt II.								

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

Schedule M (Form 990) (2014)

Page 2

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 14 **Open to Public** Inspection

Name of the organization WASHINGTON, INC.

THE JEWISH FEDERATION OF GREATER

53-0212445

FORM 990. PART III, LINE 4A AND 4B CONTINUED: LINE 4A CONTINUED: ALLOCATIONS TO BENEFICIARY AGENCIES JUSTICE FOR THE POOR, HONORING OUR AGED, ATTENDING TO THOSE WHO ARE ILL OR IN CRISIS, NURTURING AND EDUCATING OUR CHILDREN, WELCOMING STRANGERS AND HELPING EMIGRES CREATE NEW LIVES OF FREEDOM AND ECONOMIC SELF-SUFFICIENCY ARE CENTRAL TO OUR VALUES AND THE PROGRAMS WE SUPPORT. EQUALLY IMPORTANT IS OUR COMMITMENT TO INSPIRE JEWISH LEARNING AND JEWISH EXPERIENCES IN ORDER TO SHARE OUR COMMUNITY'S STRONG JEWISH IDENTITY. FORMAL EDUCATIONAL OPPORTUNITIES AND INFORMAL JEWISH EXPEREINCES LIKE SUMMER CAMPS, YOUTH GROUPS AND TRIPS TO ISRAEL PROVIDE LEARNING, RECREATIONAL, AND CULTURAL AND SOCIAL ACTIVITIES THAT NOURISH OUR BODIES AND OUR MINDS. LASTLY, WE ARE AN ORGANIZATION FOCUSED ON CONNECTING OURSELVES AND OUR LIVES TO OTHER JEWS AND JEWISH COMMUNITIES. OUR SOLIDARITY WITH ONE ANOTHER IS CELEBRATED THROUGH OUR SHARED CULTURE. IDENTITY, AND COMMITMENT TO ONE ANOTHER.

LINE 4B CONTINUED: COMMUNITY OUTEACH CONTINUED: OUR OUTREACH AND ENGAGEMENT PROGRAMS REACH OUT TO ISOLATED SENIORS, FAMILIES WITH YOUNG CHILDREN, NEWCOMERS, INTERFAITH FAMILIES, AND OTHERS TO WELCOME THEM AND INVITE THEM TO BE A PART OF OUR JEWISH FAMILY. PROGRAM SERVICE ACCOMPLISHMENTS - PROGRAM EXAMPLES INCLUDE: ONE HAPPY CAMPER OFFERS INCENTIVE GRANTS TO FAMILIES WHO CHOOSE TO SEND THEIR CHILDREN TO JEWISH OVERNIGHT CAMP FOR THE FIRST TIME. SENIOR SERVICES PROVIDES RECEREATIONAL, EDUCATIONAL AND SOCIAL SERVICES IN SENIORS' RESIDENCES SO

Schedule O (Form 990 or 990	-EZ) 20′	14					Page 2
Name of the organization	THE	JEWISH	FEDERATION	OF	GREATER	Employer identification number	
WASHINGTON, INC.						53-0212445	

THAT THEY MAY CONTINUE TO LIVE INDEPENDENTLY AT HOME. THE PJ LIBRARY BOOK CLUB ENHANCES THE TIME-HONORED TRADITION OF READING TO CHILDREN AT BEDTIME BY PROVIDING FAMILIES WITH JEWISH BOOKS AND GUIDES FOR DISCUSSION. NO MATTER HOW ONE DEFINES "BEING JEWISH", THE JEWISH FEDERATION IS THERE TO SUPPORT AND ENHANCE JEWISH LIFE FOR EVERYONE IN GREATER WASHINGTON.

FORM 990, PART VI, SECTION A, LINE 2 PAUL BERGER/MERYL ROSENBERG-FAMILY RELATIONSHIP, EDWARD AND IRENE KAPLAN FAMILY RELATIONSHIP, PHILIP MARGOLIUS-FAMILY RELATIONSHIP, SUSAN AND MICHAEL GELMAN-FAMILY RELATIONSHIP, STUART WEINBLATT/MICHA WEINBLATT-FAMILY RELATIONSHIP. PHILIP MARGOLIUS HAS BUSINESS RELATIONSHIPS WITH SEVERAL BOARD MEMBERS IN HIS CAPACITY AS THEIR ATTORNEY.

FORM 990, PART VI, SECTION A, LINE 6 THE ORGANIZATION'S MEMBERSHIP IS COMPRISED OF INDIVIDUALS AND MEMBER AGENCIES WHO ELECT THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7A BOD ELECTS EXECUTIVE COMMITTEE, ENDOWMENT TRUSTEES, AND THE PRESIDENT HAS SOME APPOINTEES.

FORM 990, PART VI, SECTION A, LINE 7B MEMBERSHIP ELECTS BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11 THE ORGANIZATION'S FORM 990 IS REVIEWED BY THE FOLLOWING: CONTROLLER, CFO, COO, AND CEO. IN ADDITION, THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS FULLY REVIEWS THE FORM 990 BEFORE FILING, AS WELL AS LEGAL COUNSEL.

FORM 990, PART VI, SECTION B, LINE 12C

THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY REGARDING FINANCIAL CONFLICTS OF INTEREST AND IN THE CASE OF GRANTS TO OTHER ORGANIZATIONS, ORGANIZATIONAL CONFLICTS. WITH REGARD TO FINANCIAL CONFLICTS, UPON DISCLOSURE OF THE EXISTENCE OF A FINANCIAL INTEREST, THE AUDIT COMMITTEE SHALL DETERMINE IF A CONFLICT OF INTEREST EXISTS AND IF IT IS DETERMINED THAT ONE EXISTS, MAY APPOINT A DISINTERESTED PERSON TO INVESTIGATE ALTERNATIVES; DETERMINE WHETHER A MORE ADVANTAGEOUS TRANSACTION CAN BE OBTAINED THAT DOES NOT PRESENT A CONFLICT AND WILL VOTE ON ITS DECISION WITHOUT THE PRESENCE OF THE PERSON WHO HAS THE CONFLICT. DIRECTORS, OFFICERS, CHAIRS OR MEMBERS OF A FEDERATION GOVERNING BODY WHO HAVE DISCLOSED A CONFLICT SHALL REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE PROPOSED TRANSACTION UNLESS REQUESTED BY THE PRESIDENT OR TREASURER TO PROVIDE INFORMATION CONCERNING THE TRANSACTION. THE PERSONS INVOLVED SHALL NOT VOTE ON SUCH MATTERS AND SHALL NOT BE PRESENT AT THE TIME OF THE VOTE.

MONITORING AND ENFORCING COMPLIANCE:

DIRECTORS, OFFICERS, CHAIRS AND MEMBERS OF A FEDERATION GOVERNING BODY ARE REQUIRED TO PROVIDE AN INITIAL AND, THEREAFTER, ANNUAL STATEMENT, REGARDING WHETHER THEY OR THEIR FAMILY MEMBERS HAVE ENGAGED IN, ARE ENGAGING OR EXPECT TO ENGAGE IN A TRANSACTION THAT WOULD CONSTITUTE A CONFLICT OF INTEREST. THEY ARE UNDER A CONTINUING OBLIGATION TO DISCLOSE

Schedule O (Form 990 or 990	-EZ) 2014						Page 2
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PROMPTLY ANY POTENTIAL OR ACTUAL CONFLICT OF INTEREST IN WRITING OR, IF PRECLUDED DUE TO THE LACK OF TIME, ORALLY, TO THE AUDIT COMMITTEE. IF THE AUDIT COMMITTEE DETERMINES THAT ANY DIRECTOR, OFFICER, CHAIR OR MEMBER OF A FEDERATION GOVERNING BODY FAILS TO COMPLY WITH THE POLICY, INCLUDING FAILURE TO TIMELY SUBMIT THE STATEMENTS REQUIRED, IT IS THE RESPONSIBILITY OF THE PRESIDENT AND TREASURER IN CONSULTATION WITH THE AUDIT COMMITTEE TO TAKE SUCH FURTHER ACTION AS MAY BE APPROPRIATE, WHICH MAY INCLUDE RECOMMENDATION TO THE BOARD THAT SUCH PERSON BE REMOVED FROM OFFICE.

FORM 990, PART VI, SECTION B, LINE 15A

FEDERATION HAS AN EXECUTIVE COMPENSATION COMMITTEE COMPRISED OF THE PAST PRESIDENT, PRESIDENT AND TREASURER. THIS COMMITTEE REVIEWS THE PERFORMANCE AND COMPENSATION OF THE CEO ANNUALLY AND MAKES RECOMMENDATIONS TO THE 15 MEMBER EXECUTIVE COMMITTEE. COMPENSATION RECOMMENDATIONS ARE INFORMED BY SALARY SURVEY INFORMATION PROVIDED FROM DIFFERENT SOURCES, INCLUDING OUR NATIONAL ORGANIZATION.

FORM 990, PART VI, SECTION C, LINE 18: UPON REQUEST, FORMS 1023 AND 990 ARE MADE AVAILABLE TO THE PUBLIC.

FORM 990, PART VI, SECTION C, LINE 19 THE GOVERNING DOCUMENTS ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE IN THE FOLLOWING YEAR. THE CONFLICT OF INTEREST POLICY IS AVAILABLE IN THE ORGANIZATION'S ELECTRONIC GOVERNANCE "MANUAL". THE FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE, ANNUAL REPORT, 2

AND ARE MAILED UPON REQUEST.

FORM 990, PART XII, LINE 2C - OVERSIGHT OF AUDIT: THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS CHANGE IN VALUE OF SPLIT INTEREST -879,040 PROVISION FOR UNCOLLECTIBLE PROMISES TO GIVE -736,089 RECOVERY OF BAD DEBT EXPENSE 459,243 PENSION RELATED CHANGES -715,451

TOTAL OTHER CHANGES IN NET ASSETS

-1,871,337. ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE JEWISH FEDERATION OF GREATER WASHINGTON TRANSFORMS SHARED RESOURCES INTO RICHER LIVES AND A STRONGER COMMUNITY. WE BRING PEOPLE AND FINANCIAL RESOURCES TOGETHER TO ADVANCE OUR THREE PART MISSION: TO CARE FOR THOSE IN NEED; TO DEEPEN ENGAGEMENT IN JEWISH LIFE AND STRENGTHEN JEWISH IDENTITY; TO CREATE CONNECTIONS AMONG JEWS LOCALLY, IN ISRAEL, AND AROUND THE WORLD.

ATTACHMENT 2

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

CAYMAN ISLANDS

BERMUDA

ISRAEL

BRITISH VIRGIN ISLANDS

IRELAND

	ATTACHMEI	NT 3
990, PART VII- COMPENSATION OF THE FIVE HIGHEST P	AID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ONLINE COMPUTERS AND COMMUNICATIONS LLC P.O BOX 428 FLORHAM PARK, NJ 07932	IT SERVICES	419,516.
SECTEK 1930 ISAAC NEWTON SQUARE #100 RESTON, VA 20190	GUARD SERVICES	321,514.
HAROLD GRINSPOON FOUNDATION 67 HUNT STREET SUITE 100 AGAWAM, MA 01001	PJ LIB BOOK DISTRIB.	247,160.
EU SERVICES 649 NORTH HORNERS LANE ROCKVILLE, MD 20850	DIRECT MAIL SERVICES	137,051.
BDO USA, LLP 8401 GREENSBORO DRIVE, SUITE 800 MCLEAN, VA 22102	AUDIT AND TAX SVC	103,077.

FORM 990, PART VIII - EXCLUDED		ATTACHMENT 4
FORM 990, PARI VIII - EACHODED	CONTRIBUTIONS	
DESCRIPTION	AMOUNT	
	83,647.	
TOTAL	83,647.	

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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	 Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. 	OMB No. 1545-0047 2014 Open to Public Inspection
Name of the organization	THE JEWISH FEDERATION OF GREATER	Employer identification number
WASHINGTON, INC		53-0212445

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if ap	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
(1) JFGW LLC	80-0898436					
6101 EXECUTIVE BLVD #100	NORTH BETHESDA, MD 20852	OPERATE BLDG.	MD	1,593,937.	19,033,994.	N/A
(2)						
(3)						
(4)						
(5)						
(6)						

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

(a) Name, address, and EIN of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section 5 contr enti	512(b)(13) rolled	
							Yes	No
(1) GILDENHORN FOUNDATION	52-1487633							
6101 EXECUTIVE BOULEVARD #100	NORTH BETHESDA, MD 20852	COMM SUPPORT	DC	501(C)(3)	LN 11, T 2	N/A		Х
(2)								
(3)								
		-						
(4)								
		-						
(5)								
		-						
(6)								
]						
(7)								

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

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Page **2**

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(I Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging tner?	(k) Percentage ownership
		country)					Yes	No		Yes	No	
(1)												l
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(controll entity
(1)								Yes N
(2)								
(3)								
(4)								
(5)								
(6)								

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THE	JEWISH	FEDERATION	OF	GREATER
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Schedule R (Form 990) 2014

Part	V Transactions With Related Organizations Complete if the organization answered "Ye	s" on Form 990, Par	t IV, line 34, 35b, or 36.				
Note	. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
	During the tax year, did the organization engage in any of the following transactions with one or more			[
	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
b	Gift, grant, or capital contribution to related organization(s)			• • • • • •	1b		X
С	Gift, grant, or capital contribution from related organization(s)			• • • • • •	1c		X
d	Loans or loan guarantees to or for related organization(s)			•••••	1d		X
е	Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(c)				1f		
	Dividends from related organization(s) Sale of assets to related organization(s)				1g		X
	Purchase of assets from related organization(s)				1h		X
i	Exchange of assets with related organization(s)			•••••	1i		X
i	Lease of facilities, equipment, or other assets to related organization(s)			•••••	1j		Х
,				•••••			
k	Lease of facilities, equipment, or other assets from related organization(s)			[1k		Х
I	Performance of services or membership or fundraising solicitations for related organization(s)				11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		Х
ο	Sharing of paid employees with related organization(s)				10		X
-	Reimbursement paid to related organization(s) for expenses				1p		X
q	Reimbursement paid by related organization(s) for expenses				1q		X
r	Other transfer of cash or property to related organization(s)			• • • • • •	1r		X X
	Other transfer of cash or property from related organization(s). If the answer to any of the above is "Yes," see the instructions for information on who must complete the second	his line including cove	red relationships and trans	action three	1s bolds		
	(a)	(b)	(c)		(d)	5.	
	Name of related organization	Transaction	Amount involved	Method o	f dete		ıg
		type (a-s)		amour	nt Invo	lvea	
(1)							
(2)							
(3)							
(3)							
(4)							
(5)							
(6)							
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Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity			inant Are all partners Share of elated, section total income excluded organizations?		(g) Share of end-of-year assets	Disprop alloc	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	man par	(j) eral or aging iner?	(k) Percentag ownership	
			sections 512-514)	Yes	No			Yes	No		Yes	No	
1)													
2)													
3)													
4)													
5)													
6)													
7)													
8)													
9)													
10)													
11)													
12)													
13)													
14)													
15)													
16)													
,													

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Schedule R (Form 990) 2014	
Part VII	Supplemental Information
	Complete this part to provide additional information for responses to questions on Schedule R (see
	instructions).