

EXTENDED TO JULY 17, 2017

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.**2015**Open to Public
Inspection**A** For the 2015 calendar year, or tax year beginning **SEP 1, 2015** and ending **AUG 31, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization JEWISH FEDERATION OF GREATER PHILADELPHIA		D Employer identification number 23-1500085
	Doing business as		E Telephone number (215) 832-0807
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 33,490,786.
	2100 ARCH STREET		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA 19103		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: NAOMI L. ADLER, ESQ. SAME AS C ABOVE			H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.JEWISHPHILLY.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1901 M State of legal domicile: PA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: JEWISH FEDERATION MOBILIZES INDIVIDUALS TO CARE FOR, CONVENE AND ENRICH OUR JEWISH COMMUNITIES.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	22	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	21	
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	117	
	6	Total number of volunteers (estimate if necessary)	2000	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	571,732.	
7b	Net unrelated business taxable income from Form 990-T, line 34	570,732.		
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	29,507,909.	25,180,665.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,397,034.	4,775,687.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-395,978.	-119,383.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	37,508,965.	29,836,969.	
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	21,897,792.	18,637,657.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,135,294.	8,301,381.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	75,022.	61,914.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,007,450.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,153,740.	7,791,376.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	37,261,848.	34,792,328.
	19	Revenue less expenses. Subtract line 18 from line 12	247,117.	-4,955,359.
	Net Assets or Fund Balances			Beginning of Current Year
20		Total assets (Part X, line 16)	295,262,348.	300,527,562.
21		Total liabilities (Part X, line 26)	104,926,849.	102,768,746.
22	Net assets or fund balances. Subtract line 21 from line 20	190,335,499.	197,758,816.	

Part II Signature Block

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

Sign Here	Signature of officer	Date 7/12/17
	NAOMI L. ADLER, ESQ., PRESIDENT & CEO Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name LYNNE JOHNSON	Preparer's signature [Signature]
	Firm's name ▶ RSM US LLP Firm's address ▶ 751 ARBOR WAY, SUITE 200 BLUE BELL, PA 19422	Date 7/12/17 Check if self-employed <input type="checkbox"/> PTIN P00757336 Firm's EIN ▶ 42-0714325 Phone no. 215.641.8600

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

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2015, or fiscal year beginning SEP 1, 2015, and ending AUG 31, 20 16▶ **Do not send to the IRS. Keep for your records.**▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.****2015**Department of the Treasury
Internal Revenue Service

Name of exempt organization

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number

23-1500085

Name and title of officer

**NAOMI L. ADLER, ESQ.
PRESIDENT & CEO****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 29,836,969.
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize RSM US LLP

ERO firm name

to enter my PIN 00085Enter five numbers, but
do not enter all zeros

as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Date ▶

7/12/17**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

24070442215

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶

7/12/17

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.
523051
10-19-15

Form **8879-EO** (2015)

12170706 133301 JEWISHFEDERA 2015.06000 JEWISH FEDERATION OF GREATER JEWISH02

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
	JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number (EIN) or 23-1500085
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 ARCH STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19103	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JEROME P. NACHLIS, CFO & CAO

- The books are in the care of ► 2100 ARCH STREET - PHILADELPHIA, PA 19103

Telephone No. ► 215-832-0807

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until APRIL 17, 2017, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year or
- ☒ tax year beginning SEP 1, 2015, and ending AUG 31, 2016.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions	
Type or print Name of exempt organization or other filer, see instructions. JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number (EIN) or 23-1500085
File by the due date for filing your return. See instructions. Number, street, and room or suite no. If a P.O. box, see instructions. 2100 ARCH STREET	Social security number (SSN)
City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19103	

Enter the Return code for the return that this application is for (file a separate application for each return) **0 1**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

JEROME P. NACHLIS, CFO & CAO

• The books are in the care of **2100 ARCH STREET - PHILADELPHIA, PA 19103**

Telephone No. **215-832-0807**

Fax No.

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **JULY 15, 2017**

5 For calendar year , or other tax year beginning **SEP 1, 2015**, and ending **AUG 31, 2016**

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS REQUIRED TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$ 0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$ 0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **Michael M. Nachlis** Title **EA**

Date **3/30/17**

Form 8868 (Rev. 1-2014)

JEWISH FEDERATION OF GREATER
PHILADELPHIA

Form 990 (2015)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE JEWISH FEDERATION OF GREATER PHILADELPHIA MOBILIZES FINANCIAL AND
VOLUNTEER RESOURCES TO ADDRESS THE COMMUNITIES' MOST CRITICAL
PRIORITIES LOCALLY, IN ISRAEL AND AROUND THE WORLD.

2 Did the organization undertake any significant program services during the year which were not listed on
the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 6,607,369. including grants of \$ 5,405,162.) (Revenue \$)
THE JEWISH FEDERATION IS COMMITTED TO FUNDING SERVICES THAT MEET THE
MOST BASIC NEEDS OF VULNERABLE COMMUNITY MEMBERS OF ALL AGES, IN
GREATER PHILADELPHIA, IN ISRAEL AND AROUND THE WORLD. THIS INCLUDES
DELIVERING NUTRITIONAL SUPPORT, PROVIDING GRANTS FOR CRITICAL NEEDS,
ENABLING PEOPLE WITH DISABILITIES TO REACH THEIR FULL POTENTIAL AND
FACILITATING A WIDE ARRAY OF SERVICES HELPING OLDER ADULTS TO AGE
SAFELY, NOURISH THEIR SOULS AND LIVE WITH DIGNITY IN THEIR OWN HOMES.

THANKS TO THE COMMUNITY'S SUPPORT:

- 15,230 LOCAL LOW-INCOME INDIVIDUALS RECEIVED FOOD ASSISTANCE
- 1,130 AT-RISK CHILDREN IN ISRAEL RECEIVED TUTORING AND MENTORING

4b (Code:) (Expenses \$ 6,404,083. including grants of \$ 5,012,117.) (Revenue \$)
THE JEWISH FEDERATION SUPPORTS AND PROMOTES VIBRANT JEWISH LIVING AND
LEARNING LOCALLY AND ABROAD FOR CHILDREN, TEENS, YOUNG ADULTS AND
FAMILIES. NO MATTER WHERE PEOPLE ARE ON THEIR JEWISH JOURNEY, WE HELP
PROVIDE OPPORTUNITIES INCLUDING EDUCATIONAL AND CAMPING RESOURCES,
LEADERSHIP DEVELOPMENT AND FAMILY PROGRAMS. THIS ENABLES COMMUNITY
MEMBERS OF ALL AGES TO ENGAGE IN THE RICH TAPESTRY OF JEWISH LIFE,
WHILE SECURING THE FUTURE OF OUR JEWISH WORLD.

THANKS TO THE COMMUNITY'S SUPPORT:

- 2,867 SCHOLARSHIPS AWARDED FOR JEWISH LEARNING AND CAMPING
- 1,575 PHILADELPHIANS PARTICIPATED IN TRANSFORMATIVE ISRAEL

4c (Code:) (Expenses \$ 8,531,481. including grants of \$ 8,125,378.) (Revenue \$)
PHILANTHROPIC FUND AND DIRECT ENDOWMENT SUPPORT AMOUNTS REPRESENT
DISTRIBUTIONS FROM OUR PHILANTHROPIC FUNDS WHICH ARE DISTRIBUTED BASED
ON THE NON-BINDING RECOMMENDATIONS OF THE PHILANTHROPIC FUND HOLDER
WHICH FURTHER THE MISSION OF JEWISH FEDERATION. ALSO INCLUDED ARE
DISTRIBUTIONS FROM ENDOWMENT FUNDS THAT SUPPORT AGENCIES AND/OR
PROGRAMS WHICH FURTHER THE MISSION OF JEWISH FEDERATION AND ARE IN
ADDITION TO THE ANNUAL GRANT PROCESS.

4d Other program services (Describe in Schedule O.)
(Expenses \$ 4,933,492. including grants of \$ 95,000.) (Revenue \$)

4e Total program service expenses 26,476,425.

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990 (2015)

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>	X	
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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		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>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	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 foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Form **990** (2015)

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990 (2015)

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Part IV Checklist of Required Schedules (continued)

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

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 69		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c X	
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 117		
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 e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a X	
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		3b X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a X	
b If "Yes," enter the name of the foreign country: SEE SCHEDULE O			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h X	
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.			
a Did the sponsoring organization make any taxable distributions under section 4966?			9a X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?		13a	
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b	

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Part 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 Schedule O. See instructions.

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	22		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b Enter the number of voting members included in line 1a, above, who are independent	1b	21		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
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			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **► PA, NY, NJ, FL, CA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **►**
JEROME P. NACHLIS, CFO & CAO - 215-832-0807
2100 ARCH STREET, PHILADELPHIA, PA 19103

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BENNETT L. AARON TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(2) CAROL AARON TRUSTEE	2.00	X						0.	0.	0.
(3) MADLYN ABRAMSON TRUSTEE	2.00	X						0.	0.	0.
(4) ARLIN M. ADAMS TRUSTEE	2.00	X						0.	0.	0.
(5) ANDREA ADELMAN TRUSTEE	2.00	X						0.	0.	0.
(6) NAOMI L. ADLER TRUSTEE; BOARD OF DIRECTOR; CEO	45.00	X		X				432,199.	0.	33,586.
(7) SUSANNA LACHS ADLER TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(8) LOUISE B. ALBERT TRUSTEE	2.00	X						0.	0.	0.
(9) HOWARD ALPERT TRUSTEE	2.00	X						0.	0.	0.
(10) BRETT H. ALTMAN TRUSTEE	2.00	X						0.	0.	0.
(11) HOWARD B. ASHER TRUSTEE	2.00	X						0.	0.	0.
(12) DANIEL E. BACINE TRUSTEE	2.00	X						0.	0.	0.
(13) LEONARD BARRACK TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(14) JEFFREY A. BARRACK TRUSTEE	2.00	X						0.	0.	0.
(15) LYNNE BARRACK TRUSTEE	2.00	X						0.	0.	0.
(16) ROBIN BATOFF TRUSTEE	2.00	X						0.	0.	0.
(17) JACK BELITSKY TRUSTEE	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHAEL R. BELMAN TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(19) DONALD A. BERG TRUSTEE	2.00	X						0.	0.	0.
(20) HAROLD BERGER TRUSTEE	2.00	X						0.	0.	0.
(21) STEVEN BERK TRUSTEE	2.00	X						0.	0.	0.
(22) EDWIN J. BERKOWITZ TRUSTEE	2.00	X						0.	0.	0.
(23) BRYNA BERMAN TRUSTEE	2.00	X						0.	0.	0.
(24) RICHARD W. BERMAN TRUSTEE	2.00	X						0.	0.	0.
(25) SHARYN BERMAN TRUSTEE	2.00	X						0.	0.	0.
(26) GLADYS B. BERNSTEIN TRUSTEE	2.00	X						0.	0.	0.
1b Sub-total								432,199.	0.	33,586.
c Total from continuation sheets to Part VII, Section A								1,529,259.	0.	147,616.
d Total (add lines 1b and 1c)								1,961,458.	0.	181,202.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **19**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
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		X

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
REN PSG, 8910 PURDUE ROAD, SUITE 500, INDIANAPOLIS, IN 46268	INVESTMENT ADMINISTRATIVE SRVCS	261,047.
LCG ASSOCIATES, 400 GALLERIA PARKWAY, SUITE 1800, ATLANTA, GA 30339	INVESTMENT CONSULTING	199,969.
JOSEPH DUGAN, INC. 905 BETHLEHEM PIKE, ERDENHIEM, PA 19038	BUILDING FACADE REPAIRS	193,162.
MAYTAV BUS COMPANY, 1512 GRIFFITH STREET, PHILADELPHIA, PA 19111	TRANSPORTATION SERVICES	112,443.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JOHN K. BINSWANGER TRUSTEE	2.00	X						0.	0.	0.
(28) CRAIG R. BLACKMAN TRUSTEE	2.00	X						0.	0.	0.
(29) MARK S. BLASKEY TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(30) PENNI F. BLASKEY TRUSTEE	2.00	X						0.	0.	0.
(31) SALLY COOPER BLEZNAK TRUSTEE	2.00	X						0.	0.	0.
(32) SHEREE I. BLOCH TRUSTEE	2.00	X						0.	0.	0.
(33) DAVID J. BLUM TRUSTEE	2.00	X						0.	0.	0.
(34) JONAS BRACHFELD TRUSTEE	2.00	X						0.	0.	0.
(35) FRED E. BRAEMER TRUSTEE	2.00	X						0.	0.	0.
(36) JONATHAN BRODER TRUSTEE	2.00	X						0.	0.	0.
(37) IRIS D. BROWNSTEIN TRUSTEE	2.00	X						0.	0.	0.
(38) ALAN E. CASNOFF TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(39) GARY CHARLESTEIN TRUSTEE	2.00 0.30	X						0.	0.	0.
(40) JASON M. COLE TRUSTEE	2.00	X						0.	0.	0.
(41) SHIRLEY CONSTON TRUSTEE	2.00	X						0.	0.	0.
(42) STUART CONSTON TRUSTEE	2.00	X						0.	0.	0.
(43) HAROLD CRAMER TRUSTEE	2.00	X						0.	0.	0.
(44) HOWARD J. DAVIS TRUSTEE	2.00	X						0.	0.	0.
(45) BERNARD P. DISHLER TRUSTEE	2.00	X						0.	0.	0.
(46) LANA DISHLER TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) STEPHEN V. DUBIN TRUSTEE	2.00	X						0.	0.	0.
(48) LOWELL H. DUBROW TRUSTEE	2.00	X						0.	0.	0.
(49) GEOFFREY M. DUFFINE TRUSTEE	2.00	X						0.	0.	0.
(50) CLAUDIA DUNNOUS TRUSTEE	2.00	X						0.	0.	0.
(51) BERNARD EIZEN TRUSTEE	2.00	X						0.	0.	0.
(52) JEROME P. EPSTEIN TRUSTEE	2.00	X						0.	0.	0.
(53) GARY E. ERLBAUM TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(54) SCOTT ERLBAUM TRUSTEE	2.00	X						0.	0.	0.
(55) DANIEL ERLBAUM TRUSTEE	2.00 1.00	X						0.	0.	0.
(56) ARLENE FICKLER TRUSTEE	2.00	X						0.	0.	0.
(57) PAUL M. FIRES TRUSTEE	2.00	X						0.	0.	0.
(58) PHYLLIS SOBO FISCHER TRUSTEE	2.00	X						0.	0.	0.
(59) JOYCE FISHBEIN TRUSTEE	2.00	X						0.	0.	0.
(60) ANNABELLE FISHMAN TRUSTEE	2.00	X						0.	0.	0.
(61) MARK FISHMAN TRUSTEE	2.00	X						0.	0.	0.
(62) RICHARD J. FOX TRUSTEE	2.00	X						0.	0.	0.
(63) LAURIE FRANZ TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(64) JOEL FREEDMAN TRUSTEE	2.00	X						0.	0.	0.
(65) LOUIS W. FRYMAN TRUSTEE	2.00	X						0.	0.	0.
(66) IVAN H. GABEL TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) ABRAHAM J. GAFNI TRUSTEE	2.00	X						0.	0.	0.
(68) LEWIS I. GANTMAN TRUSTEE	2.00	X						0.	0.	0.
(69) SARAH GENTRY TRUSTEE	2.00	X						0.	0.	0.
(70) SARITA GOCIAL TRUSTEE	2.00	X						0.	0.	0.
(71) DAVID G. GOLD TRUSTEE	2.00 0.30	X						0.	0.	0.
(72) MORRIE GOLD TRUSTEE	2.00	X						0.	0.	0.
(73) MOREY H. GOLDBERG TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(74) EDGAR R. GOLDENBERG TRUSTEE	2.00	X						0.	0.	0.
(75) ROBERT B. GOLDER TRUSTEE	2.00	X						0.	0.	0.
(76) ANDREW A. GOLDMAN TRUSTEE	2.00	X						0.	0.	0.
(77) TRACY H. GORDON TRUSTEE	2.00	X						0.	0.	0.
(78) RICHARD J. GREEN TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(79) SAMUEL J. GREENBLATT TRUSTEE	2.00	X						0.	0.	0.
(80) JOSH GROSS TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(81) DAVID GUTIN TRUSTEE	2.00	X						0.	0.	0.
(82) MARY BERT GUTMAN TRUSTEE	2.00	X						0.	0.	0.
(83) MATTHEW HANDEL TRUSTEE	2.00	X						0.	0.	0.
(84) ADAM H. HERZIG TRUSTEE	2.00	X						0.	0.	0.
(85) LEE S. HILLERSON TRUSTEE	2.00	X						0.	0.	0.
(86) ALAN J. HOFFMAN TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990

23-1500085

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(87) MARJORIE HONICKMAN TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(88) DAVID M. HOROWITZ TRUSTEE	2.00	X						0.	0.	0.
(89) DAVID L. HYMAN TRUSTEE	2.00	X						0.	0.	0.
(90) PAUL L. JAFFE TRUSTEE	2.00	X						0.	0.	0.
(91) KEITH JOFFE TRUSTEE	2.00	X						0.	0.	0.
(92) CHARLES KAHN TRUSTEE	2.00	X						0.	0.	0.
(93) ERNEST M. KAHN TRUSTEE	2.00	X						0.	0.	0.
(94) MILTON KANT TRUSTEE	2.00	X						0.	0.	0.
(95) NED J. KAPLIN TRUSTEE	2.00	X						0.	0.	0.
(96) ARTHUR KARAFIN TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(97) DAVID KASOFF TRUSTEE	2.00	X						0.	0.	0.
(98) JOY W. KEISER TRUSTEE	2.00	X						0.	0.	0.
(99) WAYNE D. KIMMEL TRUSTEE; BRD OF DIR; TREASURER	5.00	X		X				0.	0.	0.
(100) JILL KLEEMAN TRUSTEE	2.00	X						0.	0.	0.
(101) STEPHEN B. KLEIN TRUSTEE	2.00	X						0.	0.	0.
(102) RENA KOPELMAN TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(103) LISA GLASSNER KOVACS TRUSTEE	2.00	X						0.	0.	0.
(104) ARNOLD H. KRAMER TRUSTEE	2.00	X						0.	0.	0.
(105) KAREN B. KRAMER TRUSTEE	2.00	X						0.	0.	0.
(106) BRADLEY A. KROUSE TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990

23-1500085

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(107) CHARLES D. KURTZMAN TRUSTEE	2.00	X						0.	0.	0.
(108) CAROLE LANDIS TRUSTEE	2.00	X						0.	0.	0.
(109) SARA WEINBERG LAVER TRUSTEE	2.00	X						0.	0.	0.
(110) MARVIN LEVIN TRUSTEE	2.00	X						0.	0.	0.
(111) JONATHAN L. LEVIN TRUSTEE	2.00	X						0.	0.	0.
(112) LORI J. LEVIN TRUSTEE	2.00	X						0.	0.	0.
(113) MICHELE S. LEVIN TRUSTEE	2.00 0.30	X						0.	0.	0.
(114) MURRAY S. LEVIN TRUSTEE	2.00	X						0.	0.	0.
(115) SHARON P. LEVIN TRUSTEE	2.00	X						0.	0.	0.
(116) ADAM LEVINE TRUSTEE	2.00	X						0.	0.	0.
(117) ROBERT G. LEVINE TRUSTEE	2.00	X						0.	0.	0.
(118) BARBARA LINCOLN TRUSTEE	2.00	X						0.	0.	0.
(119) ADELE S. LIPTON TRUSTEE	2.00	X						0.	0.	0.
(120) IRWIN J. LIPTON TRUSTEE	2.00	X						0.	0.	0.
(121) WILLIAM D. LUTERMAN TRUSTEE	2.00	X						0.	0.	0.
(122) JILL L. MADERER TRUSTEE	2.00	X						0.	0.	0.
(123) JOANN MALMUD TRUSTEE	2.00	X						0.	0.	0.
(124) THEODORE R. MANN TRUSTEE	2.00	X						0.	0.	0.
(125) SIDNEY MARGULIES TRUSTEE	2.00	X						0.	0.	0.
(126) MICHAEL P. MARKMAN TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990

23-1500085

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(127) GREGORY MARKS TRUSTEE	2.00	X						0.	0.	0.
(128) DAVID G. MARSHALL TRUSTEE	2.00	X						0.	0.	0.
(129) ADAM P. MEINSTEIN TRUSTEE	2.00	X						0.	0.	0.
(130) SHELLEY M. MENKOWITZ TRUSTEE	2.00	X						0.	0.	0.
(131) JAMES M. MEYER TRUSTEE	2.00	X						0.	0.	0.
(132) SARA MINKOFF TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(133) JAY B. MINKOFF TRUSTEE	2.00 1.00	X						0.	0.	0.
(134) ALAN H. MOLOD TRUSTEE	2.00	X						0.	0.	0.
(135) BARBARA MORGENSTERN TRUSTEE	2.00	X						0.	0.	0.
(136) STEPHEN H. MOSS TRUSTEE	2.00	X						0.	0.	0.
(137) ROY S. NEFF TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(138) BERNARD NEWMAN TRUSTEE; BRD OF DIR; PRESIDENT	5.00	X		X				0.	0.	0.
(139) EDWARD NEWMAN TRUSTEE	2.00	X						0.	0.	0.
(140) GAIL NORRY TRUSTEE; BOARD OF DIRECTOR; VP	5.00	X		X				0.	0.	0.
(141) SHARI J. ODENHEIMER TRUSTEE	2.00	X						0.	0.	0.
(142) RONALD L. PANITCH TRUSTEE	2.00	X						0.	0.	0.
(143) RUSSELL D. PAUL TRUSTEE	2.00	X						0.	0.	0.
(144) RAYMOND G. PERELMAN TRUSTEE	2.00	X						0.	0.	0.
(145) COOKIE PERILSTEIN TRUSTEE	2.00	X						0.	0.	0.
(146) JAYNE D. PERILSTEIN TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990

23-1500085

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(147) DAVID POLLACK TRUSTEE	2.00	X						0.	0.	0.
(148) LAWRENCE J. POLLOCK TRUSTEE	2.00	X						0.	0.	0.
(149) MARC PRINE TRUSTEE	2.00	X						0.	0.	0.
(150) NAOMI D. PRUSKY TRUSTEE	2.00	X						0.	0.	0.
(151) LAWRENCE REICHLIN TRUSTEE	2.00	X						0.	0.	0.
(152) BETH G. REISBOARD TRUSTEE	2.00	X						0.	0.	0.
(153) JACOB REITER TRUSTEE	2.00	X						0.	0.	0.
(154) MARY RELLES TRUSTEE	2.00	X						0.	0.	0.
(155) ELLIOT ROSEN TRUSTEE	2.00	X						0.	0.	0.
(156) ILAN ROSENBERG TRUSTEE	2.00	X						0.	0.	0.
(157) JOYCE ROSENBERG TRUSTEE	2.00	X						0.	0.	0.
(158) PETER ROSENBERG TRUSTEE	2.00	X						0.	0.	0.
(159) JAMES A. ROSENSTEIN TRUSTEE	2.00	X						0.	0.	0.
(160) LYN M. ROSS TRUSTEE	2.00	X						0.	0.	0.
(161) MICHAEL J. ROSS TRUSTEE	2.00	X						0.	0.	0.
(162) RONALD RUBIN TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(163) RENEE G. SACKEY TRUSTEE	2.00	X						0.	0.	0.
(164) ELLYN G. SAFT TRUSTEE; BRD OF DIR; SECRETARY	5.00 1.00	X		X				0.	0.	0.
(165) SHERRIE R. SAVETT TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(166) MILTON S. SCHNEIDER TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990

23-1500085

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(167) CARL W. SCHNEIDER TRUSTEE	2.00	X						0.	0.	0.
(168) MIRIAM A. SCHNEIROV TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(169) ALLAN B. SCHNEIROV TRUSTEE	2.00	X						0.	0.	0.
(170) WILLIAM M. SCHWARTZ TRUSTEE	2.00	X						0.	0.	0.
(171) ROBERT S. SCHWARTZ TRUSTEE	2.00	X						0.	0.	0.
(172) BRYNA SILVER SCOTT TRUSTEE	2.00	X						0.	0.	0.
(173) DANIEL SEGAL TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(174) BUBBLES SEIDENBERG TRUSTEE	2.00	X						0.	0.	0.
(175) NANCY SELARNICK TRUSTEE	2.00	X						0.	0.	0.
(176) JUDIE SHAPIRO TRUSTEE	2.00	X						0.	0.	0.
(177) RAYMOND L. SHAPIRO TRUSTEE	2.00	X						0.	0.	0.
(178) JON SHAPIRO TRUSTEE	2.00	X						0.	0.	0.
(179) BETSY R. SHEERR TRUSTEE	2.00	X						0.	0.	0.
(180) ALAN W. SHEINBERG TRUSTEE	2.00	X						0.	0.	0.
(181) PHILIP M. SHIEKMAN TRUSTEE	2.00	X						0.	0.	0.
(182) SHIRLEY R. SHILS TRUSTEE	2.00	X						0.	0.	0.
(183) MURRAY H. SHUSTERMAN TRUSTEE	2.00	X						0.	0.	0.
(184) MICHAEL SILVERBERG TRUSTEE	2.00	X						0.	0.	0.
(185) HOWARD H. SILVERMAN TRUSTEE	2.00	X						0.	0.	0.
(186) BERYL D. SIMONSON TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
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23-1500085

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(187) EILEEN S. SKLAROFF TRUSTEE	2.00	X						0.	0.	0.
(188) CONSTANCE SMUKLER TRUSTEE	2.00	X						0.	0.	0.
(189) MARK I. SOLOMON TRUSTEE	2.00	X						0.	0.	0.
(190) MURRAY M. SPAIN TRUSTEE; BOARD OF DIRECTOR	5.00	X						0.	0.	0.
(191) TRACEY P. SPECTER TRUSTEE	2.00	X						0.	0.	0.
(192) S. TY STEINBERG TRUSTEE	2.00	X						0.	0.	0.
(193) E. MATTHEW STEINBERG TRUSTEE	2.00	X						0.	0.	0.
(194) MITCH STERLING TRUSTEE	2.00	X						0.	0.	0.
(195) J. BRETT STUDNER TRUSTEE	2.00 1.00	X						0.	0.	0.
(196) LEON C. SUNSTEIN TRUSTEE	2.00	X						0.	0.	0.
(197) BRANDON SWARTZ TRUSTEE	2.00	X						0.	0.	0.
(198) ANDREW SZABO TRUSTEE	2.00	X						0.	0.	0.
(199) MOSES M. VEGH TRUSTEE	2.00 0.30	X						0.	0.	0.
(200) MARGIE P. WARGON TRUSTEE	2.00	X						0.	0.	0.
(201) DAVID H. WEINSTEIN TRUSTEE	2.00	X						0.	0.	0.
(202) ARI Y. WEINTRAUB TRUSTEE	2.00	X						0.	0.	0.
(203) DANIELLE M. WEISS TRUSTEE	2.00	X						0.	0.	0.
(204) DAVID H. WICE TRUSTEE	2.00	X						0.	0.	0.
(205) MICHAEL B. WILLNER TRUSTEE	2.00	X						0.	0.	0.
(206) JEFFREY S. WILSON TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**JEWISH FEDERATION OF GREATER
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(207) SONIA B. WOLDOW TRUSTEE	2.00	X						0.	0.	0.
(208) JOSEPH M. YOHLIN TRUSTEE	2.00	X						0.	0.	0.
(209) NORMAN P. ZARWIN TRUSTEE	2.00	X						0.	0.	0.
(210) JANET ZOLOT TRUSTEE	2.00	X						0.	0.	0.
(211) JEROME NACHLIS CHIEF FINANCIAL & ADMIN OFFICER	45.00 2.00			X				223,320.	0.	29,131.
(212) STEVEN ROSENBERG CHIEF MARKETING OFFICER	45.00 25.00				X			220,723.	0.	732.
(213) DONNA FREYMAN DIRECTOR OF HUMAN RESOURCES	45.00					X		136,905.	0.	40,180.
(214) DUKE NAVE CONTROLLER	45.00 2.00					X		158,446.	0.	14,849.
(215) ROBERT QUATTRO DIRECTOR OF INFORMATION TECHNOLOGY	45.00					X		139,260.	0.	23,921.
(216) ROBERT SELTZER CAMPAIGN DIRECTOR	45.00					X		155,621.	0.	25,824.
(217) RACHEL GROSS DIRECTOR PLANNED GIVING & ENDOWMENT	45.00 0.30					X		171,404.	0.	12,979.
(218) IRA SCHWARTZ FORMER CEO	0.00						X	323,580.	0.	0.
Total to Part VII, Section A, line 1c								1,529,259.		147,616.

**JEWISH FEDERATION OF GREATER
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Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	206,164.					
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above	1f	24,974,501.					
	g Noncash contributions included in lines 1a-1f: \$		2,961,937.					
	h Total. Add lines 1a-1f							25,180,665.
Program Service Revenue	Business Code							
	2 a							
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,559,937.			3,559,937.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	(i) Real	(ii) Personal					
		3,202,048.						
		b Less: rental expenses	3,653,817.					
		c Rental income or (loss)	-451,769.					
	d Net rental income or (loss)			-451,769.	-1,047,705.	595,936.		
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		1,215,750.						
		b Less: cost or other basis and sales expenses	0.					
		c Gain or (loss)	1,215,750.					
	d Net gain or (loss)			1,215,750.			1,215,750.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a						
		b Less: direct expenses	b					
		c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a						
		b Less: direct expenses	b					
		c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold		b						
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue			Business Code					
11 a MISCELLANEOUS	900099		356,590.			356,590.		
b INVESTMENT INCOME FROM PARTNERSHI	900099		-24,204.		-24,204.			
c								
d All other revenue								
e Total. Add lines 11a-11d			332,386.					
12 Total revenue. See instructions.			29,836,969.	-1,047,705.	571,732.	5,132,277.		

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	18,452,440.	18,452,440.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	185,217.	185,217.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,435,619.	503,979.	371,288.	560,352.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,519,792.	2,021,465.	1,097,238.	2,401,089.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	261,972.	83,904.	71,389.	106,679.
9 Other employee benefits	677,926.	193,383.	161,129.	323,414.
10 Payroll taxes	406,072.	141,060.	92,170.	172,842.
11 Fees for services (non-employees):				
a Management	707,851.	706,159.	1,692.	
b Legal	131,162.	26,868.	102,895.	1,399.
c Accounting	66,353.		66,353.	
d Lobbying	41,737.	41,737.		
e Professional fundraising services. See Part IV, line 17	61,914.			61,914.
f Investment management fees	277,138.	38,476.	238,662.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	399,394.	318,007.	36,433.	44,954.
12 Advertising and promotion	131,127.	10,294.	10,029.	110,804.
13 Office expenses	364,530.	89,426.	199,476.	75,628.
14 Information technology	213,719.	43,758.	140,458.	29,503.
15 Royalties				
16 Occupancy	1,939,042.	1,659,101.	27,157.	252,784.
17 Travel	145,770.	33,744.	24,825.	87,201.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	887,543.	233,238.	39,472.	614,833.
20 Interest	1,058,354.	877,098.	181,256.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,268,768.	825,361.	289,227.	154,180.
23 Insurance	142,565.	7,721.	124,970.	9,874.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a INTRNAL PRGM-CAMPAIGN	1,877,965.	1,877,965.		
b INTRNAL PRGM-ALLOCATION	1,183,806.	1,183,806.		
c INTRNAL ENDOWMENT SUPPO	406,104.	406,104.		
d RENTAL EXPENSES (INCLU	-3,653,817.	-3,483,886.	-169,931.	
e All other expenses	202,265.		202,265.	
25 Total functional expenses. Add lines 1 through 24e	34,792,328.	26,476,425.	3,308,453.	5,007,450.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990 (2015)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	133,777.	1	73,204.
	2 Savings and temporary cash investments	168,042.	2	345,535.
	3 Pledges and grants receivable, net	5,418,438.	3	4,039,100.
	4 Accounts receivable, net	2,516,282.	4	2,484,596.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	234,206.	9	394,255.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	58,225,934.		
	b Less: accumulated depreciation	23,320,861.		
		36,050,881.	10c	34,905,073.
	11 Investments - publicly traded securities	192,685,166.	11	206,039,109.
	12 Investments - other securities. See Part IV, line 11	24,242,167.	12	24,015,703.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	33,813,389.	15	28,230,987.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	295,262,348.	16	300,527,562.	
Liabilities	17 Accounts payable and accrued expenses	6,167,310.	17	6,689,793.
	18 Grants payable	15,548,901.	18	9,015,244.
	19 Deferred revenue	284,606.	19	312,601.
	20 Tax-exempt bond liabilities	26,780,000.	20	26,660,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	12,331,067.	23	12,045,100.
	24 Unsecured notes and loans payable to unrelated third parties	1,600,000.	24	2,330,000.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	42,214,965.	25	45,716,008.
	26 Total liabilities. Add lines 17 through 25	104,926,849.	26	102,768,746.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	96,043,885.	27	98,558,282.
	28 Temporarily restricted net assets	54,939,310.	28	58,599,944.
	29 Permanently restricted net assets	39,352,304.	29	40,600,590.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	190,335,499.	33	197,758,816.
	34 Total liabilities and net assets/fund balances	295,262,348.	34	300,527,562.

Form **990** (2015)

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Form 990 (2015)

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,836,969.
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,792,328.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,955,359.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	190,335,499.
5	Net unrealized gains (losses) on investments	5	6,746,603.
6	Donated services and use of facilities	6	995,812.
7	Investment expenses	7	
8	Prior period adjustments	8	6,341,933.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,705,672.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	197,758,816.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
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 undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	

Form **990** (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2015

Open to Public Inspection

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

Name of the organization **JEWISH FEDERATION OF GREATER PHILADELPHIA**

Employer identification number
23-1500085

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

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

JEWISH FEDERATION OF GREATER

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

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	57624996.	28155765.	38692159.	29507909.	25180665.	179161494
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	57624996.	28155765.	38692159.	29507909.	25180665.	179161494
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)						12886794.
6 Public support. Subtract line 5 from line 4.						166274700

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	57624996.	28155765.	38692159.	29507909.	25180665.	179161494
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6340223.	7663265.	7580065.	6715671.	6761985.	35061209.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	1473797.	294,630.	627,783.	612,531.	571,732.	3580473.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	7196557.	434,113.	362,390.	77,324.	356,590.	8426974.
11 Total support. Add lines 7 through 10						226230150
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	73.50 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	73.45 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2015

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
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 9a) 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 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2015

JEWISH FEDERATION OF GREATER

Schedule A (Form 990 or 990-EZ) 2015

PHILADELPHIA

23-1500085 Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D - Distributions****Current Year**

1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2015 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

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

Schedule A (Form 990 or 990-EZ) 2015

JEWISH FEDERATION OF GREATER

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

23-1500085 Page 8

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

2011 AMOUNT: \$ 7,196,557.

2012 AMOUNT: \$ 434,113.

2013 AMOUNT: \$ 362,390.

2014 AMOUNT: \$ 77,324.

2015 AMOUNT: \$ 356,590.

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

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

OMB No. 1545-0047

2015**Name of the organization**JEWISH FEDERATION OF GREATER
PHILADELPHIA**Employer identification number**

23-1500085

Organization type(check one):**Filers of:****Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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 for 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).

LHA 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) (2015)

Name of organization JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number 23-1500085
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>1,187,454.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>877,156.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>800,006.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>783,376.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

23-1500085

Part II

[illegible]

Name of organization JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number 23-1500085
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) **\$** _____

Use duplicate copies of Part III if additional space is needed.

(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, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015

**Open to Public
Inspection**

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

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

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

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

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

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

Name of organization JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number 23-1500085
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2015

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JEWISH FEDERATION OF GREATER

Schedule C (Form 990 or 990-EZ) 2015 PHILADELPHIA

23-1500085 Page 2

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		10,434.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		31,303.													
c Total lobbying expenditures (add lines 1a and 1b)		41,737.													
d Other exempt purpose expenditures		37,048,408.													
e Total exempt purpose expenditures (add lines 1c and 1d)		37,090,145.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

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

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 PHILADELPHIA

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

[illegible]

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

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

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

OMB No. 1545-0047

2015**Open to Public Inspection****Name of the organization** JEWISH FEDERATION OF GREATER PHILADELPHIA**Employer identification number**
23-1500085**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	253	14
2 Aggregate value of contributions to (during year)	3,347,401.	0.
3 Aggregate value of grants from (during year)	7,208,081.	1,062,688.
4 Aggregate value at end of year	59,596,631.	20,822,974.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- | | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶
- 4 Number of states where property subject to conservation easement is located ▶
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$
- (ii) Assets included in Form 990, Part X ▶ \$
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 ▶ \$
- b Assets included in Form 990, Part X ▶ \$

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**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule D (Form 990) 2015

23-1500085 Page **3**

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) STATE OF ISRAEL BONDS	2,225,750.	END-OF-YEAR MARKET VALUE
(B) OTHER INVESTMENTS	21,789,953.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	24,015,703.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) ASSETS HELD UNDER CRT AGREEMENTS	2,585,588.
(2) NON-PARTICIPATING ASSETS	22,438,667.
(3) OTHER ASSETS	3,206,732.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	28,230,987.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DONOR DESIGNATED LIABILITIES	105,986.	
(3) LIABILITIES UNDER CGA'S	3,308,003.	
(4) LIABILITIES UNDER REVOCABLE TRUSTS	13,308,185.	
(5) LIABILITIES UNDER CRT AGREEMENTS	1,374,328.	
(6) INVESTMENT IN EXPONENT	2,958,539.	
(7) ACCRUED PENSION BENEFIT COST	23,379,826.	
(8) OTHER NON-CURRENT LIABILITIES	1,281,141.	
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	45,716,008.	

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 ☒

Schedule D (Form 990) 2015

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule D (Form 990) 2015

23-1500085 Page **4**

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

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

1	Total revenue, gains, and other support per audited financial statements	1	45,091,253.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	6,746,603.
b	Donated services and use of facilities	2b	995,812.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	4,338,944.
e	Add lines 2a through 2d	2e	12,081,359.
3	Subtract line 2e from line 1	3	33,009,894.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-3,172,925.
c	Add lines 4a and 4b	4c	-3,172,925.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	29,836,969.

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

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

1	Total expenses and losses per audited financial statements	1	44,009,869.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	995,812.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	8,498,867.
e	Add lines 2a through 2d	2e	9,494,679.
3	Subtract line 2e from line 1	3	34,515,190.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	277,138.
c	Add lines 4a and 4b	4c	277,138.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	34,792,328.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE JEWISH FEDERATION ENDOWMENT FUNDS ARE INTENDED TO SUPPORT AND PROVIDE A SECURE FINANCIAL FOUNDATION FOR THE JEWISH COMMUNITY IN GREATER PHILADELPHIA, IN ISRAEL AND AROUND THE WORLD. THE JEWISH FEDERATION IS DEDICATED TO CREATING PERMANENT ASSETS TO PROVIDE THE COMMUNITY WITH THE RESOURCES NECESSARY TO SUPPORT A FLOURISHING JEWISH COMMUNITY, NOW AND IN THE FUTURE. OUR ENDOWMENT FUNDS DIRECTLY SUPPORT JEWISH FEDERATION'S ANNUAL CAMPAIGN AND PRIORITIES IN OUR LOCAL JEWISH COMMUNITY, IN ISRAEL AND AROUND THE WORLD. THE ENDOWMENT FUNDS ALSO SUPPORT LOCAL AGENCIES, SYNAGOGUES, SCHOOLS, NATIONAL JEWISH ORGANIZATIONS AND GENERAL CHARITABLE ORGANIZATIONS.

Part XIII Supplemental Information (continued)

PART X, LINE 2:

THE ORGANIZATION ADOPTED ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THIS INTERPRETATION CLARIFIES THE ACCOUNTING FOR INCOME TAXES BY PRESCRIBING THE MINIMUM STANDARD A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS. THE JEWISH FEDERATION AND THE JEWISH EXPONENT HAVE NOT TAKEN ANY UNCERTAIN TAX POSITION THAT SHOULD BE ACCOUNTED FOR UNDER ASC 740. MANAGEMENT BELIEVES THAT THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS ENDED ON OR PRIOR TO AUGUST 31, 2012. HOWEVER, TO THE EXTENT NET OPERATING LOSS CARRY-FORWARDS ARE UTILIZED IN THE FUTURE, THESE LOSSES MAY STILL BE ADJUSTED UPON EXAMINATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF NON-PARTICIPATING ASSETS	5,208,643.
CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST	33,388.
CHANGE IN VALUE OF CHARITABLE GIFT ANNUITIES	-382,235.
EQUITY ON LOSS OF EXPONENT	-243,714.
INVESTMENT MANAGEMENT FEES SHOWN AS EXPENSE	-277,138.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	4,338,944.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL INCOME RECORDED AS EXPENSE	505,096.
RENTAL EXPENSE RECLASSES	-3,653,817.
INVESTMENT INCOME FROM PARTNERSHIPS	-24,204.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-3,172,925.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

PROVISION FOR UNCOLLECTIBLES	378,437.
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Part XIII Supplemental Information (continued)

RENTAL EXPENSE RECLASSES	3,653,817.
RENTAL INCOME RECORDED AS EXPENSE	-505,096.
FORFEITED GRANTS	-27,895.
PENSION RELATED CHANGES OTHER THAN PERIODIC COSTS	4,961,265.
LOSS ON INTEREST RATE SWAP	38,339.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	8,498,867.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES SHOWN AS EXPENSE	277,138.
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**SCHEDULE F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015**Open to Public
Inspection**

Name of the organization

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number

23-1500085**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
MIDDLE EAST AND NORTH AFRICA	1	1	PROGRAM SERVICES	PROGRAM OPERATIONS - ISRAEL OFFICE	133,683.
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		18,039,613.
3 a Sub-total	1	1			18,173,296.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	1			18,173,296.

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

Schedule F (Form 990) 2015

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule F (Form 990) 2015

23-1500085

Page **2**

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

3 Enter total number of other organizations or entities ▶ _____

Schedule F (Form 990) 2015

Part III can be duplicated if additional space is needed.

[illegible]

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule F (Form 990) 2015

23-1500085 Page **4**

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* ☐ Yes ☒ No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☒ Yes ☐ No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) 2015

Part V Supplemental Information

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

PART I, LINE 2:

JEWISH FEDERATIONS OF NORTH AMERICA (JFNA) ADOPTED A PROCEDURE FOR ASSISTING JEWISH FEDERATIONS IN MAKING FOREIGN GRANTS WHICH DO NOT HAVE AN "AMERICAN FRIENDS OF" OFFICE WHICH IS A PUBLIC CHARITY LISTED WITH THE IRS. JEWISH FEDERATION DISTRIBUTES ALL FOREIGN GRANTS FROM DONOR-ADVISED, ENDOWMENT AND OTHER FUNDS IN ACCORDANCE WITH JFNA'S POLICY AS FOLLOWS:

1. UPON RECEIPT OF A RECOMMENDATION FOR A GRANT FROM A DONOR-ADVISED FUND OR OTHER SOURCE FOR A FOREIGN GRANT, JEWISH FEDERATION WILL SEND A LETTER VIA EMAIL TO ISRAELGRANTS@JEWISHFEDERATIONS.ORG OR BY MAIL TO THE ADDRESS BELOW RELAYING THE NAME OF THE PROPOSED GRANTEE, CHECK NUMBER OR WIRE DATE AND THE AMOUNT AND PURPOSE OF THE GRANT TO JFNA.

SONIA SANTOS

THE JEWISH FEDERATIONS OF NORTH AMERICA

25 BROADWAY SUITE 1700

NEW YORK, NY 10004

2. JFNA FORWARDS THE LETTER, WHICH CONTAINS ALL REQUIRED INFORMATION AND RECOMMENDATION, TO THE UNITED ISRAEL APPEAL ("UIA") WHICH CONDUCTS A PRE-GRANT REVIEW. AS PART OF THE PRE-GRANT REVIEW, UIA DETERMINES WHETHER OR NOT THE GRANT WILL BE USED FOR CHARITABLE PURPOSES AND CONFIRMS THAT THE CHARITY IS QUALIFIED TO RECEIVE SUCH GRANT. UIA ALSO REQUIRES THE BENEFICIARY TO SUBMIT OR UPDATE ALL THE REQUIRED LEGAL DOCUMENTS.

3. BASED UPON THE RESULTS OF THE UIA REVIEW, JFNA IS INFORMED THAT THE RECOMMENDATION IS APPROVED. IF THE JEWISH FEDERATION CHECK OR WIRE WAS SENT WITH THE LETTER, JFNA INFORMS THE JEWISH FEDERATION THAT THE GRANT WAS APPROVED, DEPOSITS THE CHECK OR ACCEPTS THE WIRE AND SUBSEQUENTLY,

Part V Supplemental Information

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

WIRES THE FUNDS TO UIA FOR DISTRIBUTION TO THE FOREIGN GRANT RECIPIENT.

IF THE CHECK OR WIRE WAS NOT SENT, JFNA INFORMS THE JEWISH FEDERATION THE GRANT WAS APPROVED AND REQUESTS THAT THE CHECK OR WIRE BE SENT. GIVEN THE PRIOR INVESTIGATION BY UIA, IT IS ANTICIPATED THAT THESE RECOMMENDATIONS WILL GENERALLY BE APPROVED AND THE INITIATING JEWISH FEDERATION WILL BE ADVISED THAT THE GRANT HAS BEEN APPROVED. IF THE RECOMMENDATION IS DECLINED, JFNA WILL NOTIFY THE JEWISH FEDERATION AND THE FUNDS WILL BE RETURNED TO JEWISH FEDERATION. IF THE RECOMMENDATION IS DECLINED AND THE DOLLARS SENT TO JFNA WERE FROM A DONOR-ADVISED FUND OR OTHER ENDOWMENT FUND, THE DOLLARS WILL BE RETURNED TO THE JEWISH FEDERATION FOR CREDIT TO THE APPROPRIATE FUND.

4. JFNA AND UIA WILL RETAIN THE NECESSARY DOCUMENTATION TO SATISFY IRS REPORTING AND RECORDKEEPING REQUIREMENTS FOR THE FOREIGN GRANT AND UIA WILL REPORT THE FOREIGN GRANT ON ITS FORM 990.

5. JEWISH FEDERATION REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501(C)(3) DOMESTIC U.S. CHARITY. IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSIDIARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501(C)(3) ORGANIZATIONS -- EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULES F.

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization **JEWISH FEDERATION OF GREATER PHILADELPHIA**

Employer identification number
23-1500085

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
- b ☒ Internet and email solicitations
- c ☒ Phone solicitations
- d ☒ In-person solicitations
- e ☒ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SIEGEL MARKETING GROUP - P.O. BOX 686598, CHICAGO, IL	TELEMARKETING SOLICITATIONS		X	140,331.	35,724.	104,607.
Total				140,331.	35,724.	104,607.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

PA, NJ, NY, FL, CA

JEWISH FEDERATION OF GREATER

Schedule G (Form 990 or 990-EZ) 2015 PHILADELPHIA

23-1500085 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on 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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

JEWISH FEDERATION OF GREATER

Schedule G (Form 990 or 990-EZ) 2015 PHILADELPHIA

23-1500085 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 entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a** 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 ► \$ _____.

c 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

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SIEGEL MARKETING GROUP

(I) ADDRESS OF FUNDRAISER: P.O. BOX 686598, CHICAGO, IL 60695

[illegible]

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization **JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number
23-1500085

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

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

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

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
AAUW MAKEFIELD AREA BRANCH PA INC. 178 FORREST DRIVE HOLLAND, PA 18966	46-3627182	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ABRAMS HEBREW ACADEMY 31 WEST COLLEGE AVENUE YARDLEY, PA 19067	21-6001415	501 (C) (3)	99,187.	0.			GENERAL AND/OR PROGRAM SUPPORT
ABRAMS HEBREW ACADEMY 31 WEST COLLEGE AVENUE YARDLEY, PA 19067	21-6001415	501 (C) (3)	4,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ADOPT-AN-AUTHOR INC 9447 COVENTRY LAKE COURT WEST PALM BEACH, FL 33411	14-1844572	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
ADVANCING WOMEN PROFESSIONALS AND THE JEWISH COMMUNITY INC. - 520 EIGHTH AVENUE 4TH FLOOR - NEW YORK, NY 10018	13-4190787	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AISH HATORAH-METRO PHILADELPHIA INC - 50 MONTGOMERY AVENUE - BALA CYNWYD, PA 19004	23-2854127	501 (C) (3)	10,581.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **181.**

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

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

Schedule I (Form 990) (2015)

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule I (Form 990)

23-1500085

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
ALBERT EINSTEIN MEDICAL CENTER 5501 OLD YORK ROAD PHILADELPHIA, PA 19141-3018	23-1396794	501 (C) (3)	5,378.	0.			GENERAL AND/OR PROGRAM SUPPORT
ALBERT EINSTEIN MEDICAL CENTER 5501 OLD YORK ROAD PHILADELPHIA, PA 19141-3018	23-1396794	501 (C) (3)	20,850.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ALLIANCE FOR CONTINUING RABBINIC EDUCATION LTD - 1212 MELROSE AVENUE - MELROSE PARK, PA 19027	27-5247875	501 (C) (3)	20,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN ASSOCIATES, BEN GURION UNIVERSITY OF THE NEGEV - 1001 AVENUE OF THE AMERICAS 19TH FLOOR - NEW YORK, NY 10018	23-7270753	501 (C) (3)	28,313.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC. - 125 BROAD ST., 18TH FLOOR - NEW YORK, NY 10004	13-6213516	501 (C) (3)	5,600.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC. - 633 THIRD AVENUE, 20TH FL - NEW YORK, NY 10017	13-1623886	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC. - 633 THIRD AVENUE, 20TH FL - NEW YORK, NY 10017	13-1623886	501 (C) (3)	3,360.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN FRIENDS OF ELI P.O. BOX 12 MERION STATION, PA 19066	52-2171745	501 (C) (3)	1,250.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN FRIENDS OF ELI P.O. BOX 12 MERION STATION, PA 19066	52-2171745	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

Schedule I (Form 990)

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule I (Form 990)

23-1500085

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
AMERICAN FRIENDS OF LEKET ISRAEL P.O. BOX 2090 TEANECK, NJ 07666-1490	20-8202424	501 (C) (3)	31,250.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN FRIENDS OF LIBI 420 HARVARD STREET BROOKLINE, MA 02446	32-0081620	501 (C) (3)	167,713.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN FRIENDS OF MAGEN DAVID ADOM - 352 7TH AVENUE, 4TH FLOOR - NEW YORK, NY 10001-5012	13-1790719	501 (C) (3)	26,650.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN FRIENDS OF NISHMAT 520 EIGHTH AVENUE, 4TH FLOOR NEW YORK, NY 10018	04-3106173	501 (C) (3)	5,960.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN FRIENDS OF THE ISRAEL MUSEUM - 545 FIFTH AVENUE SUITE 920 - NEW YORK, NY 10017	23-7182582	501 (C) (3)	14,425.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN FRIENDS OF YESHIVA DMIR INC - 5227 NEW UTRECHT AVE - BROOKLYN, NY 11219	13-2946608	501 (C) (3)	8,250.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN FRIENDS OF YESHIVA DMIR INC - 5227 NEW UTRECHT AVE - BROOKLYN, NY 11219	13-2946608	501 (C) (3)	1,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN JEWISH COMMITTEE 165 EAST 56TH STREET NEW YORK, NY 10022	13-5563393	501 (C) (3)	1,211.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN JEWISH COMMITTEE 165 EAST 56TH STREET NEW YORK, NY 10022	13-5563393	501 (C) (3)	10,280.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE - 711 THIRD AVENUE 10TH FLOOR - NEW YORK, NY 10017	13-1656634	501 (C) (3)	81,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN SOCIETY FOR TECHNION 55 EAST 59TH STREET NEW YORK, NY 10022	13-0434195	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
AMERICAN SOCIETY FOR TECHNION 55 EAST 59TH STREET NEW YORK, NY 10022	13-0434195	501 (C) (3)	23,006.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMERICAN SOCIETY FOR THE PROTECTION OF NATURE IN ISRAEL (ASPNI) - 28 ARRANDALE AVENUE - GREAT NECK, NY 11024-1804	52-1467954	501 (C) (3)	25,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
AMIT 817 BROADWAY 4TH FLOOR NEW YORK, NY 10003	13-5631502	501 (C) (3)	5,860.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ANDREW MCDONOUGH B+ FOUNDATION 101 ROCKLAND CIRCLE WILMINGTON, DE 19803	42-1741037	501 (C) (3)	5,850.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	13-1818723	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	13-1818723	501 (C) (3)	3,650.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ANTI-DEFAMATION LEAGUE FOUNDATION 605 THIRD AVENUE NEW YORK, NY 10158-3560	13-2887439	501 (C) (3)	220,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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BENCHMARK SCHOOL 2107 NORTH PROVIDENCE ROAD MEDIA, PA 19063	23-1728895	501 (C) (3)	15,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
BETH JACOB HEBREW TEACHERS COLLEGE INC - 1213 ELM AVENUE - BROOKLYN, NY 11230	13-2507037	501 (C) (3)	5,450.	0.			GENERAL AND/OR PROGRAM SUPPORT
BETH SHOLOM CONGREGATION 8231 OLD YORK ROAD ELKINS PARK, PA 19027	02-0806071	501 (C) (3)	18,870.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
BIRTHRIGHT ISRAEL FOUNDATION P.O. BOX 5892 HICKSVILLE, NY 11801	13-4092050	501 (C) (3)	150,900.	0.			GENERAL AND/OR PROGRAM SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION P.O. BOX 5892 HICKSVILLE, NY 11801	13-4092050	501 (C) (3)	18,900.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
B'NAI B'RITH YOUTH ORGANIZATION 800 EIGHTH STREET NW WASHINGTON, DC 20001	31-1794932	501 (C) (3)	30,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
B'NAI B'RITH YOUTH ORGANIZATION 800 EIGHTH STREET NW WASHINGTON, DC 20001	31-1794932	501 (C) (3)	100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
BOARD OF RABBIS OF GREATER PHILADELPHIA - 2100 ARCH STREET - PHILADELPHIA, PA 19103	23-1571787	501 (C) (3)	30,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
BOY SCOUTS OF AMERICA 1485 VALLEY FORGE ROAD WAYNE, PA 19087	23-1352052	501 (C) (3)	15,000.	0.			GENERAL AND/OR PROGRAM SUPPORT

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CAMP RAMAH IN THE POCONOS 2100 ARCH STREET PHILADELPHIA, PA 19103	23-1607236	501 (C) (3)	1,596.	0.			GENERAL AND/OR PROGRAM SUPPORT
CAMP RAMAH IN THE POCONOS 2100 ARCH STREET PHILADELPHIA, PA 19103	23-1607236	501 (C) (3)	22,036.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CHABAD LUBAVITCH OF THE MAIN LINE INC. - 625 MONTGOMERY AVENUE - MERION STATION, PA 19066	20-0072887	501 (C) (3)	21,800.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CHALLAH FOR HUNGER 201 S. CAMAC STREET, FLOOR 2 PHILADELPHIA, PA 19107	26-1540827	501 (C) (3)	18,375.	0.			GENERAL AND/OR PROGRAM SUPPORT
CHEDER CHABAD - PHILADELPHIA 625 MONTGOMERY AVENUE MERION STATION, PA 19072	27-0854753	501 (C) (3)	46,596.	0.			GENERAL AND/OR PROGRAM SUPPORT
COMMITTEE FOR THE RESCUE OF ISRAEL'S BABIES - 333 WEST 86TH STREET, SUITE 1003 - NEW YORK, NY 10024	22-3431457	501 (C) (3)	200,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION ADATH JESHURUN 7763 OLD YORK ROAD ELKINS PARK, PA 19027	23-1484192	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
CONGREGATION ADATH JESHURUN 7763 OLD YORK ROAD ELKINS PARK, PA 19027	23-1484192	501 (C) (3)	12,286.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION BETH AVRAHAM 439 SOUTH NULTON AVENUE PALMER TOWNSHIP, PA 18045	20-1161320	501 (C) (3)	5,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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CONGREGATION BETH EL-NER TAMID 715 PAXON HOLLOW ROAD BROOMALL, PA 19008	23-1555443	501 (C) (3)	3,824.	0.			GENERAL AND/OR PROGRAM SUPPORT
CONGREGATION BETH EL-NER TAMID 715 PAXON HOLLOW ROAD BROOMALL, PA 19008	23-1555443	501 (C) (3)	2,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION BETH OR 239 WELSH ROAD MAPLE GLEN, PA 19002	23-6005909	501 (C) (3)	51,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION KENESETH ISRAEL 2227 CHEW STREET ALLENTOWN, PA 18104	23-1489807	501 (C) (3)	2,913.	0.			GENERAL AND/OR PROGRAM SUPPORT
CONGREGATION KENESETH ISRAEL 2227 CHEW STREET ALLENTOWN, PA 18104	23-1489807	501 (C) (3)	7,168.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION OHEV SHALOM 2 CHESTER ROAD WALLINGFORD, PA 19086	23-1457981	501 (C) (3)	10,672.	0.			GENERAL AND/OR PROGRAM SUPPORT
CONGREGATION OHEV SHALOM 2 CHESTER ROAD WALLINGFORD, PA 19086	23-1457981	501 (C) (3)	750.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
CONGREGATION RODEPH SHALOM 615 NORTH BROAD STREET PHILADELPHIA, PA 19123-2495	23-1365228	501 (C) (3)	1,541.	0.			GENERAL AND/OR PROGRAM SUPPORT
CONGREGATION RODEPH SHALOM 615 NORTH BROAD STREET PHILADELPHIA, PA 19123-2495	23-1365228	501 (C) (3)	18,700.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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CYSTIC FIBROSIS FOUNDATION 2004 SPROUL ROAD #208 BROOMALL, PA 19008	23-2573569	501 (C) (3)	16,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
CYSTIC FIBROSIS FOUNDATION 2004 SPROUL ROAD #208 BROOMALL, PA 19008	23-2573569	501 (C) (3)	200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
DOCTORS WITHOUT BORDERS USA INC. 333 7TH AVE. 2ND FLOOR NEW YORK, NY 10001-5004	13-3433452	501 (C) (3)	328.	0.			GENERAL AND/OR PROGRAM SUPPORT
DOCTORS WITHOUT BORDERS USA INC. 333 7TH AVE. 2ND FLOOR NEW YORK, NY 10001-5004	13-3433452	501 (C) (3)	5,450.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
EMUNAH OF AMERICA, INC 363 7TH AVENUE SUITE 205 NEW YORK, NY 10001	13-2670365	501 (C) (3)	5,600.	0.			GENERAL AND/OR PROGRAM SUPPORT
EVERGREEN STATE COLLEGE FOUNDATION 2700 EVERGREEN PKWY. NW L1113 OLYMPIA, WA 98505	91-0981488	501 (C) (3)	38,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FEDERATION EARLY LEARNING SERVICE (FELS) - 10700 JAMISON AVENUE - PHILADELPHIA, PA 19116	23-1352554	501 (C) (3)	15,240.	0.			GENERAL AND/OR PROGRAM SUPPORT
FEDERATION EARLY LEARNING SERVICE (FELS) - 10700 JAMISON AVENUE - PHILADELPHIA, PA 19116	23-1352554	501 (C) (3)	4,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FEDERATION HOUSING INC. 8900 ROOSEVELT BOULEVARD PHILADELPHIA, PA 19115	23-1733766	501 (C) (3)	141,000.	0.			GENERAL AND/OR PROGRAM SUPPORT

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FEMALE HEBREW BENEVOLENT SOCIETY 2125 DELANCEY PLACE PHILADELPHIA, PA 19103	23-6269039	501 (C) (3)	26,618.	0.			GENERAL AND/OR PROGRAM SUPPORT
FEMALE HEBREW BENEVOLENT SOCIETY 2125 DELANCEY PLACE PHILADELPHIA, PA 19103	23-6269039	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FIRST SERVE - NM INC. P.O. BOX 31904 SANTA FE, NM 87594	27-0044395	501 (C) (3)	6,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FOOD FOR THE POOR, INC. 6401 LYONS ROAD COCONUT CREEK, FL 33073	59-2174510	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FRACTURED ATLAS PRODUCTIONS, INC 248 WEST 35TH ST. 10TH FLOOR NEW YORK, NY 10001	11-3451703	501 (C) (3)	6,925.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FRIENDS CENTRAL SCHOOL 1101 CITY AVENUE WYNNEWOOD, PA 19096	23-1352636	501 (C) (3)	7,695.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FRIENDS OF MCGILL UNIVERSITY P.O. BOX 28137 NEW YORK, NY 10087-8137	23-7054819	501 (C) (3)	70,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FRIENDS OF THE ARAVA INSTITUTE 896 BEACON STREET BOSTON, MA 02215	11-3485736	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FRIENDS OF THE BRISKER YESHIVA INC PO BOX 278 NEW YORK, NY 10116	23-7181650	501 (C) (3)	5,500.	0.			GENERAL AND/OR PROGRAM SUPPORT

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FRIENDS OF THE ISRAEL DEFENSE FORCES (IDF) - 1430 BROADWAY SUITE 1301 - NEW YORK, NY 10018	13-3156445	501 (C) (3)	3,375.	0.			GENERAL AND/OR PROGRAM SUPPORT
FRIENDS OF THE ISRAEL DEFENSE FORCES (IDF) - 1430 BROADWAY SUITE 1301 - NEW YORK, NY 10018	13-3156445	501 (C) (3)	4,900.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
FRIENDS OF YAD LAKASHISH/LIFELINE FOR THE OLD - P.O. BOX 494 - ENGLEWOOD, NJ 07631	76-0734439	501 (C) (3)	25,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GARDEN RAISED BOUNTY-GRUB 2016 ELLIOTT AVENUE NW OLYMPIA, WA 98502	91-1594312	501 (C) (3)	11,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GERMANTOWN JEWISH CENTRE 400 WEST ELLET STREET PHILADELPHIA, PA 19119	23-1396831	501 (C) (3)	24,260.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GERSHMAN Y 401 SOUTH BROAD STREET PHILADELPHIA, PA 19147	23-1352242	501 (C) (3)	75,082.	0.			GENERAL AND/OR PROGRAM SUPPORT
GERSHMAN Y 401 SOUTH BROAD STREET PHILADELPHIA, PA 19147	23-1352242	501 (C) (3)	21,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GIVEWELL 182 HOWARD STREET #208 SAN FRANCISCO, CA 94105	20-8625442	501 (C) (3)	7,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GOLDEN SLIPPER CENTER FOR SENIORS 3901 CONSHOCKEN AVENUE PHILADELPHIA, PA 19131	23-2793956	501 (C) (3)	202,560.	0.			GENERAL AND/OR PROGRAM SUPPORT

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GRATZ COLLEGE 7605 OLD YORK ROAD MELROSE PARK, PA 19027	23-1352642	501 (C) (3)	246,600.	0.			GENERAL AND/OR PROGRAM SUPPORT
GRATZ COLLEGE 7605 OLD YORK ROAD MELROSE PARK, PA 19027	23-1352642	501 (C) (3)	41,400.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
GREATER PHILADELPHIA URBAN AFFAIRS COALITION - 1207 CHESTNUT STREET SUITE 700 - PHILADELPHIA, PA 19107	23-7046393	501 (C) (3)	35,058.	0.			GENERAL AND/OR PROGRAM SUPPORT
HADASSAH OF GREATER PHILADELPHIA 1518 WALNUT STREET, SUITE 555 PHILADELPHIA, PA 19102	13-6227614	501 (C) (3)	360.	0.			GENERAL AND/OR PROGRAM SUPPORT
HADASSAH OF GREATER PHILADELPHIA 1518 WALNUT STREET, SUITE 555 PHILADELPHIA, PA 19102	13-6227614	501 (C) (3)	10,166.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HADASSAH THE WOMEN'S ZIONIST ORGANIZATION OF AMERICA INC. - 50 WEST 58TH STREET - NEW YORK, NY 10019	13-1656651	501 (C) (3)	35,360.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HAR ZION TEMPLE 1500 HAGYS FORD ROAD PENN VALLEY, PA 19072-1195	23-1365242	501 (C) (3)	29,496.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HIAS AND COUNCIL MIGRATION SERVICE OF PHILADELPHIA INC - 2100 ARCH STREET, 3RD FLOOR - PHILADELPHIA, PA 19103	23-1405597	501 (C) (3)	48,975.	0.			GENERAL AND/OR PROGRAM SUPPORT
HIAS AND COUNCIL MIGRATION SERVICE OF PHILADELPHIA INC - 2100 ARCH STREET, 3RD FLOOR - PHILADELPHIA, PA 19103	23-1405597	501 (C) (3)	3,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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HILLEL OF GREATER PHILADELPHIA 215 S 39TH STREET PHILADELPHIA, PA 19104	23-1365179	501 (C) (3)	618,936.	0.			GENERAL AND/OR PROGRAM SUPPORT
HILLEL OF GREATER PHILADELPHIA 215 S 39TH STREET PHILADELPHIA, PA 19104	23-1365179	501 (C) (3)	32,018.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HILLSIDE SCHOOL 404 ROBIN HILL STREET MARLBOROUGH, MA 01752	04-2111216	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HILLTOWN COMMUNITY HEALTH CENTERS, INC. - 58 OLD NORTH ROAD - WORTHINGTON, MA 01098	04-2161484	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HOLOCAUST AWARENESS MUSEUM AND EDUCATION CENTER - 10100 JAMISON AVENUE - PHILADELPHIA, PA 19116	23-1969470	501 (C) (3)	1,063.	0.			GENERAL AND/OR PROGRAM SUPPORT
HOLOCAUST AWARENESS MUSEUM AND EDUCATION CENTER - 10100 JAMISON AVENUE - PHILADELPHIA, PA 19116	23-1969470	501 (C) (3)	30,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HONOLULU MUSEUM OF ART 900 SOUTH BERETANIA STREET HONOLULU, HI 96814	99-0079713	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
HUB THEATRE COMPANY OF BOSTON INC. 50 GREEN ST #409 BROOKLINE, MA 02446	46-1283093	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
I.S. KOSLOFF TORAH ACADEMY HIGH SCHOOL FOR GIRLS - 50 MONTGOMERY AVENUE - BALA CYNWYD, PA 19004	45-2611143	501 (C) (3)	54,032.	0.			GENERAL AND/OR PROGRAM SUPPORT

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INTERFAITH CENTER OF GREATER PHILADELPHIA - 100 W. OXFORD ST. SUITE E-1300 - PHILADELPHIA, PA 19122	05-0597080	501 (C) (3)	5,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
INTERFAITHFAMILY COM INC 90 OAK STREET, 4TH FLOOR NEWTON, MA 02464	04-3577816	501 (C) (3)	35,925.	0.			GENERAL AND/OR PROGRAM SUPPORT
INTERFAITHFAMILY COM INC 90 OAK STREET, 4TH FLOOR NEWTON, MA 02464	04-3577816	501 (C) (3)	5,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
INTERNATIONAL DOCUMENTARY ASSOCIATION - 3470 WILSHIRE BLVD. SUITE 980 - LOS ANGELES, CA 90010	95-3911227	501 (C) (3)	18,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ISRAEL GUIDE DOG CENTER FOR THE BLIND - 968 EASTON RD STE H - WARRINGTON, PA 18976	23-2519029	501 (C) (3)	7,450.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JACK M. BARRACK HEBREW ACADEMY 272 SOUTH BRYN MAWR AVENUE BRYN MAWR, PA 19010-2105	23-1352614	501 (C) (3)	551,251.	0.			GENERAL AND/OR PROGRAM SUPPORT
JACK M. BARRACK HEBREW ACADEMY 272 SOUTH BRYN MAWR AVENUE BRYN MAWR, PA 19010-2105	23-1352614	501 (C) (3)	28,770.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JCC KAISERMAN 45 HAVERFORD ROAD WYNNEWOOD, PA 19096	27-0841715	501 (C) (3)	7,385.	0.			GENERAL AND/OR PROGRAM SUPPORT
JCC KAISERMAN 45 HAVERFORD ROAD WYNNEWOOD, PA 19096	27-0841715	501 (C) (3)	65,220.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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JEWISH ADOPTION & FAMILY CARE OPTIONS - JAFCO - 4200 NORTH UNIVERSITY DRIVE - SUNRISE, FL 33351	20-0898587	501 (C) (3)	5,600.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH STREET - 10TH FLOOR NEW YORK, NY 10016	13-1624104	501 (C) (3)	20,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH STREET - 10TH FLOOR NEW YORK, NY 10016	13-1624104	501 (C) (3)	1,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEVS HUMAN SERVICES 1845 WALNUT STREET, 7TH FLOOR PHILADELPHIA, PA 19103-4707	23-1352118	501 (C) (3)	574,268.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEVS HUMAN SERVICES 1845 WALNUT STREET, 7TH FLOOR PHILADELPHIA, PA 19103-4707	23-1352118	501 (C) (3)	26,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH FAMILY AND CHILDREN'S SERVICE OF GREATER PHILADELPHIA - 2100 ARCH STREET, 5TH FLOOR - PHILADELPHIA, PA 19103	23-1352026	501 (C) (3)	1,473,649.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEWISH FAMILY AND CHILDREN'S SERVICE OF GREATER PHILADELPHIA - 2100 ARCH STREET, 5TH FLOOR - PHILADELPHIA, PA 19103	23-1352026	501 (C) (3)	28,700.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH FARM SCHOOL 5020 CEDAR AVENUE PHILADELPHIA, PA 19143	45-4100890	501 (C) (3)	50,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEWISH FEDERATION OF PALM BEACH COUNTY - 4601 COMMUNITY DRIVE - WEST PALM BEACH, FL 33417-2760	59-0948696	501 (C) (3)	44,250.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY, INC. - 9901 DONNA KLEIN BLVD - BOCA RATON, FL 33428	59-1945109	501 (C) (3)	40,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH FEDERATION OF SOUTHERN NEW JERSEY - 1301 SPRINGDALE ROAD SUITE 200 - CHERRY HILL, NJ 08003-2761	21-0634489	501 (C) (3)	7,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH FEDERATION OF THE LEHIGH VALLEY - 702 N 22ND ST - ALLENTOWN, PA 18104	23-6396949	501 (C) (3)	11,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH LEARNING VENTURE 7607 OLD YORK ROAD MELROSE PARK, PA 19027	23-2473518	501 (C) (3)	796,729.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEWISH LEARNING VENTURE 7607 OLD YORK ROAD MELROSE PARK, PA 19027	23-2473518	501 (C) (3)	11,250.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021	13-1659627	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021	13-1659627	501 (C) (3)	30,204.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH ORTHODOX FEMINIST ALLIANCE INC. - 520 8TH AVE, 4TH FLOOR - NEW YORK, NY 10018	52-2106560	501 (C) (3)	20,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH RELIEF AGENCY 200 MONUMENT ROAD, SUITE 8 BALA CYNWYD, PA 19004	26-2578017	501 (C) (3)	161,954.	0.			GENERAL AND/OR PROGRAM SUPPORT

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JEWISH RELIEF AGENCY 200 MONUMENT ROAD, SUITE 8 BALA CYNWYD, PA 19004	26-2578017	501 (C) (3)	60,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH SOCIAL POLICY ACTION NETWORK (JSPAN) - 1735 MARKET STREET, SUITE A-417 - PHILADELPHIA, PA 19103	20-0460097	501 (C) (3)	7,750.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK, NY 10027	13-0887640	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK, NY 10027	13-0887640	501 (C) (3)	1,280.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JUDITH CREED HOMES FOR ADULT INDEPENDENCE - FEDERATION HALL 274 S BRYN MAWR AVENUE - BRYN MAWR, PA 19010	23-2493728	501 (C) (3)	47,500.	0.			GENERAL AND/OR PROGRAM SUPPORT
JUDITH CREED HOMES FOR ADULT INDEPENDENCE - FEDERATION HALL 274 S BRYN MAWR AVENUE - BRYN MAWR, PA 19010	23-2493728	501 (C) (3)	10,350.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
JUPITER MEDICAL CENTER FOUNDATION, INC. - 1210 SOUTH OLD DIXIE HIGHWAY - JUPITER, FL 33458	65-0132406	501 (C) (3)	13,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
KENESETH ISRAEL REFORM CONGREGATION - 8339 OLD YORK ROAD - ELKINS PARK, PA 19027	23-1365269	501 (C) (3)	14,672.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
KESHER ISRAEL CONGREGATION 1000 POTTSTOWN PIKE WEST CHESTER, PA 19380	23-1948656	501 (C) (3)	6,344.	0.			GENERAL AND/OR PROGRAM SUPPORT

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KING & LOW-HEYWOOD THOMAS SCHOOLS INC. - 1450 NEWFIELD AVENUE - STAMFORD, CT 06905	06-1229222	501 (C) (3)	50,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
KLEINLIFE 10100 JAMISON AVENUE PHILADELPHIA, PA 19116	27-0840848	501 (C) (3)	1,102,046.	0.			GENERAL AND/OR PROGRAM SUPPORT
KLEINLIFE 10100 JAMISON AVENUE PHILADELPHIA, PA 19116	27-0840848	501 (C) (3)	10,220.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
KOHELET YESHIVA HIGH SCHOOL 223 NORTH HIGHLAND AVENUE MERION STATION, PA 19066	23-2915026	501 (C) (3)	72,938.	0.			GENERAL AND/OR PROGRAM SUPPORT
KOHELET YESHIVA HIGH SCHOOL 223 NORTH HIGHLAND AVENUE MERION STATION, PA 19066	23-2915026	501 (C) (3)	4,420.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
LANKENAU MEDICAL CENTER FOUNDATION 100 EAST LANCASTER AVENUE WYNNWOOD, PA 19096	23-2176723	501 (C) (3)	10,100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
LEHIGH UNIVERSITY 27 MEMORIAL DRIVE WEST BETHLEHEM, PA 18015	24-0795445	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
LIVING BEYOND BREAST CANCER 40 MONUMENT ROAD, SUITE 104 BALA CYNWYD, PA 19004	23-2734689	501 (C) (3)	10,700.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
LOWER MERION SYNAGOGUE P.O. BOX 2528 BALA CYNWYD, PA 19004	23-2615920	501 (C) (3)	43,561.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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LYMPHOMA RESEARCH FOUNDATION 115 BROADWAY, SUITE 1301 NEW YORK, NY 10006	95-4335088	501 (C) (3)	20,350.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
MADLYN AND LEONARD ABRAMSON CENTER FOR JEWISH LIFE - 1425 HORSHAM ROAD - NORTH WALES, PA 19454-1320	23-2083077	501 (C) (3)	489,915.	0.			GENERAL AND/OR PROGRAM SUPPORT
MADLYN AND LEONARD ABRAMSON CENTER FOR JEWISH LIFE - 1425 HORSHAM ROAD - NORTH WALES, PA 19454-1320	23-2083077	501 (C) (3)	73,385.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
MAIN LINE REFORM TEMPLE BETH ELOHIM - 410 MONTGOMERY AVENUE - WYNNEWOOD, PA 19096	23-1494772	501 (C) (3)	9,430.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
MELROSE B'NAI ISRAEL EMANU-EL 8339 OLD YORK ROAD ELKINS PARK, PA 19027	23-2184737	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
MIKVEH AT TEMPLE BETH HILLEL BETH EL - 1001 REMINGTON ROAD - WYNNEWOOD, PA 19096	04-3683148	501 (C) (3)	66,700.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
MINDING YOUR MIND 124 SIBLEY AVENUE ARDMORE, PA 19003	20-8448707	501 (C) (3)	8,250.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
MISHKAN SHALOM 4101 FREELAND AVENUE PHILADELPHIA, PA 19128	23-2518433	501 (C) (3)	14,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
MOISHE HOUSE 441 SAXONY ROAD ENCINITAS, CA 92024	26-2599786	501 (C) (3)	25,000.	0.			GENERAL AND/OR PROGRAM SUPPORT

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MOVING TRADITIONS 261 OLD YORK ROAD SUITE 734 JENKINTOWN, PA 19046	34-2015014	501 (C) (3)	69,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
MOVING TRADITIONS 261 OLD YORK ROAD SUITE 734 JENKINTOWN, PA 19046	34-2015014	501 (C) (3)	5,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
NANTUCKET CONSERVATION FOUNDATION INC. - 118 CLIFF ROAD - NANTUCKET, MA 02554	04-2373794	501 (C) (3)	200,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
NATIONAL COUNCIL OF YOUNG ISRAEL 9590 W. SAHARA AVENUE LAS VEGAS, NV 89117	88-0348899	501 (C) (3)	6,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
NATIONAL LIBERTY MUSEUM 321 CHESTNUT STREET PHILADELPHIA, PA 19106	23-2788633	501 (C) (3)	146,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
NATIONAL MULTIPLE SCLEROSIS SOCIETY, GREATER DELAWARE VALLEY CHAPTER - 30 SOUTH 17TH STREET, SUITE 800 - PHILADELPHIA, PA 19103	23-1401535	501 (C) (3)	5,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY - 101 SOUTH INDEPENDENCE MALL EAST - PHILADELPHIA, PA 19106-2517	23-7379280	501 (C) (3)	418.	0.			GENERAL AND/OR PROGRAM SUPPORT
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY - 101 SOUTH INDEPENDENCE MALL EAST - PHILADELPHIA, PA 19106-2517	23-7379280	501 (C) (3)	7,650.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
NEW YORK UNIVERSITY 25 WEST 4TH STREET 4TH FLOOR NEW YORK, NY 10012	13-5562308	501 (C) (3)	9,864.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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OHIO STATE UNIVERSITY FOUNDATION 1480 WEST LANE AVENUE COLUMBUS, OH 43221	31-1145986	501 (C) (3)	66,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
OPERA PHILADELPHIA 1420 LOCUST STREET SUITE 210 PHILADELPHIA, PA 19102	23-1504706	501 (C) (3)	10,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
OR HADASH 190 CAMP HILL ROAD FORT WASHINGTON, PA 19034	23-2520118	501 (C) (3)	11,470.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
OROT 7601 OLD YORK ROAD MELROSE PARK, PA 19027	20-0803538	501 (C) (3)	54,278.	0.			GENERAL AND/OR PROGRAM SUPPORT
OROT 7601 OLD YORK ROAD MELROSE PARK, PA 19027	20-0803538	501 (C) (3)	2,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ORT AMERICA 75 MAIDEN LANE 10TH FLOOR NEW YORK, NY 10038	13-5562424	501 (C) (3)	14,810.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PARK AVENUE SYNAGOGUE 50 EAST 87TH STREET NEW YORK, NY 10128	13-1860028	501 (C) (3)	67,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PARKINSON COUNCIL 111 PRESIDENTIAL BOULEVARD STE 250 BALA CYNWYD, PA 19004	91-1803234	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PASSOVER LEAGUE OF PHILADELPHIA 215 N. PRESIDENTIAL BLVD. 1ST FLOOR BALA CYNWYD, PA 19004	23-6267034	501 (C) (3)	17,527.	0.			GENERAL AND/OR PROGRAM SUPPORT

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PASSOVER LEAGUE OF PHILADELPHIA 215 N. PRESIDENTIAL BLVD. 1ST FLOOR BALA CYNWYD, PA 19004	23-6267034	501 (C) (3)	250.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PEF ISRAEL ENDOWMENT FUND INC. 317 MADISON AVENUE, SUITE 607 NEW YORK, NY 10017	13-6104086	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PENN STATE HILLEL 117 PASQUERILLA SPIRITUAL CENTER UNIVERSITY PARK, PA 16802	25-6078799	501 (C) (3)	42,300.	0.			GENERAL AND/OR PROGRAM SUPPORT
PENNSYLVANIA JEWISH COALITION 800 N. THIRD STREET SUITE 403 HARRISBURG, PA 17102	23-2210499	501 (C) (4)	90,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
PHILABUNDANCE 3616 S. GALLOWAY STREET PHILADELPHIA, PA 19148	23-2290505	501 (C) (3)	689.	0.			GENERAL AND/OR PROGRAM SUPPORT
PHILABUNDANCE 3616 S. GALLOWAY STREET PHILADELPHIA, PA 19148	23-2290505	501 (C) (3)	83,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PHILADELPHIA BAR FOUNDATION 1101 MARKET STREET 11TH FLOOR PHILADELPHIA, PA 19107-2911	23-1660797	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PHILADELPHIA CITY ROWING, INC. 450 PLYMOUTH ROAD SUITE 305 PLYMOUTH MEETING, PA 19462	27-1522343	501 (C) (3)	100,100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PHILADELPHIA MUSEUM OF ART P.O. BOX 7646 PHILADELPHIA, PA 19101	23-1365388	501 (C) (3)	58.	0.			GENERAL AND/OR PROGRAM SUPPORT

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PHILADELPHIA MUSEUM OF ART P.O. BOX 7646 PHILADELPHIA, PA 19101	23-1365388	501 (C) (3)	28,645.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PHILADELPHIA ORCHESTRA ASSOCIATION ONE SOUTH BROAD STREET 14TH FLOOR PHILADELPHIA, PA 19107	23-1352289	501 (C) (3)	10,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PHOENIX COUNTRY DAY SCHOOL 3901 E STANFORD DR PARADISE VLY, AZ 85253	86-0172671	501 (C) (3)	50,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
PIRC PENNSYLVANIA IMMIGRATION RESOURCE CENTER - P.O. BOX 20339 - YORK, PA 17402	23-2851213	501 (C) (3)	6,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
POLITZ HEBREW ACADEMY 9225 OLD BUSTLETON AVENUE PHILADELPHIA, PA 19115	22-2436383	501 (C) (3)	229,762.	0.			GENERAL AND/OR PROGRAM SUPPORT
RAYMOND AND RUTH PERELMAN JEWISH DAY SCHOOL - 49 HAVERFORD ROAD - WYNNEWOOD, PA 19096-3628	23-1496890	501 (C) (3)	696,907.	0.			GENERAL AND/OR PROGRAM SUPPORT
RAYMOND AND RUTH PERELMAN JEWISH DAY SCHOOL - 49 HAVERFORD ROAD - WYNNEWOOD, PA 19096-3628	23-1496890	501 (C) (3)	56,300.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
RECONSTRUCTIONIST RABBINICAL COLLEGE - 1299 CHURCH ROAD - WYNCOTE, PA 19095-1898	23-1710675	501 (C) (3)	56,451.	0.			GENERAL AND/OR PROGRAM SUPPORT
RECONSTRUCTIONIST RABBINICAL COLLEGE - 1299 CHURCH ROAD - WYNCOTE, PA 19095-1898	23-1710675	501 (C) (3)	1,560.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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RESOURCES FOR HUMAN DEVELOPMENT 4700 WISSAHICKON AVE SUITE 126 PHILADELPHIA, PA 19144	23-1727133	501 (C) (3)	12,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
RONALD MCDONALD HOUSE OF NEW YORK, INC. - 405 EAST 73RD STREET - NEW YORK, NY 10021	13-2933654	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
ROSENBACH MUSEUM AND LIBRARY 2008-2010 DELANCEY PLACE PHILADELPHIA, PA 19103	23-1425055	501 (C) (3)	12,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
SMITH MEMORIAL PLAYGROUND & PLAYHOUSE - 3500 RESERVOIR DRIVE - PHILADELPHIA, PA 19121-1095	23-1353547	501 (C) (3)	5,600.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
SOLOMON R. GUGGENHEIM FOUNDATION 1071 FIFTH AVENUE NEW YORK, NY 10128	13-5562233	501 (C) (3)	14,935.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY, AL 36104	63-0598743	501 (C) (3)	11,250.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
STEPHEN S. WISE TEMPLE 15500 STEPHEN S. WISE DRIVE LOS ANGELES, CA 90077	95-6087552	501 (C) (3)	17,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
TEMPLE ADATH ISRAEL 250 NORTH HIGHLAND AVENUE MERION STATION, PA 19066	23-1431499	501 (C) (3)	24,548.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
TEMPLE BETH ZION BETH ISRAEL 300 SOUTH 18TH STREET PHILADELPHIA, PA 19103	23-1501180	501 (C) (3)	8,754.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
TEMPLE EMANU-EL OF PALM BEACH 190 NORTH COUNTY ROAD PALM BEACH, FL 33480	59-1027143	501 (C) (3)	8,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE CHEVRA INC. 2002 LUDLOW STREET, 3RD FLOOR PHILADELPHIA, PA 19103	20-1261430	501 (C) (3)	80,125.	0.			GENERAL AND/OR PROGRAM SUPPORT
THE CHEVRA INC. 2002 LUDLOW STREET, 3RD FLOOR PHILADELPHIA, PA 19103	20-1261430	501 (C) (3)	17,100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE CHILDREN'S HOSPITAL OF PHILADELPHIA FOUNDATION - 1352, P.O. BOX 8500 - PHILADELPHIA, PA 19178-1352	23-2237932	501 (C) (3)	11,900.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE EPISCOPAL ACADEMY 1785 BISHOP WHITE DRIVE NEWTOWN SQUARE, PA 19073-9902	23-1370500	501 (C) (3)	32,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE FRIENDSHIP CIRCLE PHILADELPHIA REGION INC - 754 SOUTH 9TH STREET 3RD FL - PHILADELPHIA, PA 19147	27-1039799	501 (C) (3)	49,625.	0.			GENERAL AND/OR PROGRAM SUPPORT
THE FRIENDSHIP CIRCLE PHILADELPHIA REGION INC - 754 SOUTH 9TH STREET 3RD FL - PHILADELPHIA, PA 19147	27-1039799	501 (C) (3)	13,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE JEWISH FEDERATIONS OF NORTH AMERICA - 25 BROADWAY SUITE 1700 - NEW YORK, NY 10004-1010	13-1624240	501 (C) (3)	3,533,913.	0.			GENERAL AND/OR PROGRAM SUPPORT
THE JEWISH FEDERATIONS OF NORTH AMERICA - 25 BROADWAY SUITE 1700 - NEW YORK, NY 10004-1010	13-1624240	501 (C) (3)	12,300.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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(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
THE KLINE GALLAND CENTER 7500 SEWARD AVENUE S SEATTLE, WA 98118	91-1154904	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE NATIONAL JEWISH CENTER FOR LEARNING AND LEADERSHIP (CLAL) - 440 PARK AVENUE SOUTH, 4TH FLOOR - NEW YORK, NY 10016-8012	23-7390358	501 (C) (3)	50,100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE SHIPLEY SCHOOL 814 YARROW STREET BRYN MAWR, PA 19010	23-1352677	501 (C) (3)	52,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE TRUST FOR PUBLIC LAND 101 MONTGOMERY STREET SUITE 900 SAN FRANCISCO, CA 94104	23-7222333	501 (C) (3)	20,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE WESTMARK SCHOOL 5461 LOUISE AVENUE ENCINO, CA 91316	95-4616645	501 (C) (3)	33,100.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
THE WEXNER FOUNDATION 8000 WALTON PARKWAY SUITE 110 NEW ALBANY, OH 43054	23-7320631	501 (C) (3)	175,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
TORAH ACADEMY OF GREATER PHILADELPHIA - 742 ARGYLE ROAD - WYNNEWOOD, PA 19096	23-1645684	501 (C) (3)	141,327.	0.			GENERAL AND/OR PROGRAM SUPPORT
TORAH ACADEMY OF GREATER PHILADELPHIA - 742 ARGYLE ROAD - WYNNEWOOD, PA 19096	23-1645684	501 (C) (3)	4,670.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
TRIBE 12 201 S. CAMAC STREET 2ND FLOOR PHILADELPHIA, PA 19107	27-1610125	501 (C) (3)	224,352.	0.			GENERAL AND/OR PROGRAM SUPPORT

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
TRIBE 12 201 S. CAMAC STREET 2ND FLOOR PHILADELPHIA, PA 19107	27-1610125	501 (C) (3)	1,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT STREET - CENTRAL GIFTS OFFICE - PHILADELPHIA, PA 19104	23-1352685	501 (C) (3)	790,220.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
TULANE UNIVERSITY P.O. BOX 61075 NEW ORLEANS, LA 70161-9886	72-0423889	501 (C) (3)	18,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
UJA FEDERATION OF NEW YORK 130 EAST 59TH STREET NEW YORK, NY 10022	51-0172429	501 (C) (3)	10,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM - 820 SECOND AVENUE, 10TH FLOOR - NEW YORK, NY 10017-4504	13-1659707	501 (C) (3)	15,200.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
UNITED WAY OF GREATER PHILADELPHIA & SOUTHERN NEW JERSEY - 1709 BENJAMIN FRANKLIN PKWY - PHILADELPHIA, PA 19103	23-1556045	501 (C) (3)	14,840.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
UNITED WAY OF RHODE ISLAND, INC. 50 VALLEY STREET PROVIDENCE, RI 02906	05-0276059	501 (C) (3)	82,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
UNIVERSITY OF THE ARTS 320 SOUTH BROAD STREET PHILADELPHIA, PA 19102	23-1639911	501 (C) (3)	5,900.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
WESLEY ENHANCED LIVING MAIN LINE 101 EAST COUNTY LINE ROAD SUITE 200 HATBORO, PA 19040	23-2090256	501 (C) (3)	45,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
WHITEMARSH FOUNDATION P.O. BOX 538 LAFAYETTE HILL, PA 19444	02-0545031	501 (C) (3)	10,500.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
WILLS EYE HOSPITAL 840 WALNUT STREET, SUITE 1520 PHILADELPHIA, PA 19107	23-6000204	501 (C) (3)	5,100.	0.			GENERAL AND/OR PROGRAM SUPPORT
WOMEN'S OPPORTUNITIES RESOURCE CENTER - 2010 CHESTNUT STREET - PHILADELPHIA, PA 19103	23-2741508	501 (C) (3)	36,000.	0.			GENERAL AND/OR PROGRAM SUPPORT
YESHIVAT CHOVEVEI TORAH RABBINICAL SCHOOL LTD - 3700 HENRY HUDSON PKWY, 2ND FLOOR - RIVERDALE, NY 10463	13-4159739	501 (C) (3)	9,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS
YESHIVAT MAHARAT 3700 HENRY HUDSON PARKWAY BRONX, NY 10463	01-0954142	501 (C) (3)	60,000.	0.			GENERAL AND/OR PROGRAM SUPPORT - DONOR ADVISED FUNDS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIP	34	185,217.	0.		

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

PART I, LINE 2:

PROGRAM ALLOCATIONS GRANT MAKING AND MONITORING POLICIES & PROCEDURES -

GRANTS SHALL BE CONSISTENT WITH THE GENERAL PURPOSES OF THE JEWISH

FEDERATION. GRANTS ARE TO BE MADE PRIMARILY, BUT NOT EXCLUSIVELY, TO JEWISH

ORGANIZATIONS IN THE GREATER PHILADELPHIA AREA AND AROUND THE WORLD.

GRANTS SHALL BE USED FOR ONE OF THE FOLLOWING PURPOSES:

- TO FUND PROGRAMS ALIGNED WITH THE PRIORITIES OF JEWISH FEDERATION, AS

DETERMINED BY THE BOARD OF DIRECTORS AND THE VARIOUS FUNDING COMMITTEES OF

JEWISH FEDERATION.

Part IV Supplemental Information

- TO PROVIDE "SEED MONEY" FOR START-UP COSTS FOR NEW OR INNOVATIVE PROJECTS, SCHOLARSHIP/FINANCIAL AID, TRAINING OPPORTUNITIES, AND ONE-TIME SPECIAL PROJECTS. THE FOCUS WILL BE PRIMARILY ON THE SOCIAL, WELFARE, HEALTH, EDUCATION, COMMUNITY RELATIONS, AND CULTURAL FIELDS WITHIN THE PHILADELPHIA JEWISH AND GENERAL COMMUNITY.

- TO RESPOND TO LOCAL, NATIONAL AND INTERNATIONAL EMERGENCY NEEDS.

LIMITATIONS:

- GRANTS ARE GENERALLY NOT AVAILABLE FOR OPERATING PURPOSES OR ADDITIONS TO OTHER ENDOWMENT FUNDS.

- ALL GRANTS MUST BE CONSISTENT WITH THE PURPOSES OF JEWISH FEDERATION, MUST NOT BE PROHIBITED BY ANY LIMITATION ON THE ABILITY OF JEWISH FEDERATION TO DISBURSE FUNDS AND MUST COMPLY WITH ANY RESTRICTIONS OR LIMITATIONS WHICH ARE OR MAY BE ADOPTED BY THE BOARD OF DIRECTORS OF JEWISH FEDERATION. THE REQUESTING GRANTEE MUST DEMONSTRATE ITS FUNDING EXPECTATIONS, CAPABILITIES AND INTENTIONS FOR THE CONTINUITY OF PROGRAMS/INITIATIVES THAT ARE PROPOSED TO EXIST BEYOND THE PERIOD(S) APPROVED THROUGH THIS GRANTS PROCESS.

- IT IS EXPECTED THAT ORGANIZATIONS SEEKING GRANTS SHALL SHARE IN FINANCING SUCH PROJECTS/INITIATIVES. OTHER SOURCES OF FUNDING FOR A GRANTEE'S GRANT REQUEST ARE TO BE CONSIDERED DURING THE GRANTS REVIEW PROCESS.

- GRANTS SHALL GENERALLY BE A SOURCE OF ORIGINAL SUPPORT FOR PROJECTS AND NOT A REPLACEMENT OF OTHER SOURCES OF SUPPORT.

- IF ANY ORGANIZATION DOES NOT BEGIN THE FUNDED PROJECT/INITIATIVE WITHIN AN INDICATED TIME PERIOD OF RECEIVING THE GRANT APPROVAL, THE FUNDING FOR THE GRANT WILL AUTOMATICALLY BE REVOKED, UNLESS THERE IS PRIOR CONSULTATION BETWEEN THE GRANTEE AND JEWISH FEDERATION.

- JEWISH FEDERATION MAY IMPOSE CONDITIONS, AS IT DEEMS APPROPRIATE ON THE GRANTING OF FUNDS TO ANY GRANTEE.

Part IV Supplemental Information

GRANT PROCESS:

IN GENERAL, AN ANNUAL REQUEST FOR PROPOSALS WILL BE MADE IN ALIGNMENT WITH THE TOP PRIORITIES OF JEWISH FEDERATION, AS DETERMINED BY THE BOARD OF DIRECTORS AND THE VARIOUS FUNDING COMMITTEES OF JEWISH FEDERATION. THE REQUEST FOR PROPOSALS WILL INCLUDE GOALS, MEASURABLE OUTCOMES AND TARGET POPULATIONS. THEY WILL BE POSTED ON JEWISH FEDERATION'S WEBSITE, PUBLISHED IN THE JEWISH EXPONENT AND DISTRIBUTED VIA E-MAIL TO PREVIOUS PARTNERS. JEWISH FEDERATION MAY UTILIZE A LETTER OF INTENT PROCESS IN ORDER TO PROMOTE AN EFFICIENT PROCESS FOR INQUIRING AGENCIES AND INTERNAL COMMITTEES.

APPROPRIATE SUB-COMMITTEES WILL REVIEW GRANT REQUESTS AND EITHER REJECT OR RECOMMEND THEIR APPROVAL BASED ON ALIGNMENT WITH JEWISH FEDERATION PRIORITIES, PREVIOUS EVALUATION OF THE SPECIFIC PROGRAM AND/OR PREVIOUS EVALUATION OF OTHER PROGRAMS AT THE APPLICANT AGENCY. FUNDING RECOMMENDATIONS ARE FURTHER REVIEWED AND PRIORITIZED BY THE COMMISSIONS (WHICH ARE SUB-COMMITTEES OF THE POLICY STRATEGY & FUNDING (PSF) COMMITTEE) AND THE PSF COMMITTEE. THE PSF COMMITTEE PROVIDES A FINAL RECOMMENDATION TO THE BOARD OF DIRECTORS AND THE BOARD OF TRUSTEES. AFTER BOARD ACTION ON THE PSF COMMITTEE RECOMMENDATION, APPLICANTS SHALL BE NOTIFIED PROMPTLY OF THE DECISION REGARDING THEIR APPLICATION.

INCLUDED IN THE RECOMMENDATIONS MAY BE A POOL OF FUNDS AS DISCRETIONARY FUNDS FOR EMERGENCY AND OTHER REQUESTS FROM ORGANIZATIONS DUE TO UNFORESEEN CIRCUMSTANCES THAT ARISE DURING THE FUNDING PERIOD. THE APPROVAL FOR USING THESE FUNDS IS UNDER THE DIRECTION OF THE PSF COMMITTEE.

PAYOUT SCHEDULE:

A PAYMENT SCHEDULE WILL BE SPECIFIED IN A FORMAL GRANT AGREEMENT. CONSULTATION WITH JEWISH FEDERATION IS REQUIRED PRIOR TO ANY USE OF THESE FUNDS IN A MANNER OTHER THAN AS APPROVED. UNUSED FUNDS MUST BE RETURNED TO

Part IV Supplemental Information

JEWISH FEDERATION.

PROGRAM EVALUATION:

PROPOSALS MUST GENERALLY INCORPORATE A METHOD OF EVALUATION TO DETERMINE THE EFFECTIVENESS OF THE PROPOSED PROGRAM AGAINST THE MEASURABLE OBJECTIVES STATED IN THE REQUEST FOR PROPOSALS. IF REQUIRED, ORGANIZATIONS SHOULD DESIGNATE A PROJECT DIRECTOR AND/OR AN OVERSIGHT COMMITTEE TO MONITOR THE OBJECTIVES AND GOALS OF THE PROGRAM.

DEADLINES:

GRANT PROPOSALS MUST BE SUBMITTED IN ACCORDANCE WITH THE ANNUAL SCHEDULE. JEWISH FEDERATION IS NOT BOUND TO APPROVE AN APPLICATION NOR DOES IT ASSUME ANY OBLIGATION TO AN APPLICANT BECAUSE OF MEETING SCHEDULE CHANGES.

MONITORING - INTERIM/FINAL REPORTS:

EVALUATION AND PERIODIC PROGRESS REPORTS ARE REQUIRED FOR ALL GRANTS IN ORDER TO ENSURE THAT SUCH GRANTS ARE USED FOR THE PROPER PURPOSES AND TO MEASURE IMPACT OF THOSE EFFORTS. CONTINUED FUNDING IS CONTINGENT UPON SATISFACTORY PROGRESS IN ACHIEVING THE PROJECT GOALS. UPON COMPLETION OF ALL FUNDED PROJECTS, A FINAL REPORT MUST BE SUBMITTED INDICATING BOTH THE USE OF THE FUNDS AND THE PROGRAM RESULTS. REPORTS ARE REVIEWED BY JEWISH FEDERATION STAFF, COMMISSIONS AND PSF IN ORDER TO HELP DETERMINE FUTURE FUNDING DECISIONS.

ENDOWMENT FUNDS GRANTMAKING & MONITORING POLICIES AND PROCEDURES:

THE JEWISH FEDERATION OWNS, IS AFFILIATED WITH, OR IS FIDUCIARY OF A WIDE ARRAY OF ENDOWMENT RELATED FUNDS, TRUSTS, ARRANGEMENTS AND ENTITIES ("ENDOWMENTS" HEREIN).

THE PURPOSE OF JEWISH FEDERATION'S ENDOWMENT FUNDS ARE:

1. TO PROVIDE FOR EXPANDING NEEDS AND EMERGENCIES IN THE JEWISH COMMUNITY;

Part IV Supplemental Information

2. TO ASSURE THE CONTINUITY OF JEWISH FEDERATION'S PHILANTHROPIC
MISSION; AND

3. TO PROVIDE FINANCIAL SECURITY AND STABILITY FOR JEWISH FEDERATION'S
FUTURE ACCORDING TO NATIONALLY ACCEPTED ENDOWMENT PRINCIPLES CONCERNING
GROWTH, SPENDING, AND MANAGEMENT.

IN ORDER TO ADMINISTER A PROGRAM TO RAISE AND MANAGE ENDOWMENTS FOR
JEWISH FEDERATION AND SUPERVISE DISTRIBUTIONS THEREFROM, JEWISH
FEDERATION ESTABLISHED THE FEDERATION ENDOWMENTS CORPORATION ("FEC"
HEREIN). FEC WILL OVERSEE JEWISH FEDERATION'S ENDOWMENT ASSETS AS
HEREIN DEFINED AND WILL NOT MANAGE OR DISTRIBUTE ANY FUNDS OF ITS OWN,
OR OF ANY OTHER ENTITY OR PERSON, UNLESS EXPRESSLY APPROVED BY THE
BOARD OF DIRECTORS OF FEC OR BY THE BOARD OF TRUSTEES OF JEWISH
FEDERATION.

CATEGORIES OF THE ENDOWMENTS

A. UNRESTRICTED ENDOWMENT

THE TERM UNRESTRICTED ENDOWMENT EMBRACES VARIOUS ENDOWMENT FUNDS, GIVEN
TO JEWISH FEDERATION FROM TIME TO TIME FOR THE GENERAL UNRESTRICTED
PURPOSES OF JEWISH FEDERATION. A PERCENTAGE OF SUCH FUNDS IS ANNUALLY
AVAILABLE FOR DISTRIBUTION FOR THE GENERAL PURPOSES OF JEWISH
FEDERATION, AS AUTHORIZED BY JEWISH FEDERATION'S BOARD OF TRUSTEES. IT
IS INTENDED THAT THE UNRESTRICTED ENDOWMENT CONTINUE TO GROW AND THAT
THE AVAILABLE AUTHORIZED PERCENTAGE BE EXCEEDED ONLY AS APPROVED BY THE
BOARD OF DIRECTORS.

THESE FUNDS DO NOT INCLUDE FUNDS RESTRICTED BY WILL, DONOR OR A COURT
AS TO USE OF PRINCIPAL AND/OR INCOME FOR ANY SPECIFIC PURPOSE. THE
UNRESTRICTED ENDOWMENT ALSO DOES NOT INCLUDE PHILANTHROPIC FUNDS,
RESTRICTED ENDOWMENT FUNDS, TRUSTS OR SUPPORTING FOUNDATIONS.

ADMINISTRATION OF THE UNRESTRICTED ENDOWMENT IS GOVERNED BY THESE

Part IV Supplemental Information

POLICIES AND UNLESS APPROVED BY THE BOARD OF TRUSTEES OF JEWISH
FEDERATION, ALL UNRESTRICTED ENDOWMENT FUNDS SHALL BE INVESTED
ACCORDING TO POLICIES ESTABLISHED BY THE INVESTMENT COMMITTEE.

B. RESTRICTED ENDOWMENT

THE TERM RESTRICTED ENDOWMENT EMBRACES FUNDS GIVEN TO JEWISH
FEDERATION, RESTRICTED AS TO THE USE OF INCOME AND PRINCIPAL FOR A
DEFINED PURPOSE, OR SPECIAL PURPOSE FUNDS. THE RESTRICTED ENDOWMENT
INCLUDES FUNDS RESTRICTED BY WILL, DONOR, OR COURT ORDER.

ADMINISTRATION OF THE RESTRICTED ENDOWMENT IS GOVERNED BY THESE
POLICIES AND, UNLESS APPROVED BY THE BOARD OF TRUSTEES OF JEWISH
FEDERATION, ALL RESTRICTED ENDOWMENT FUNDS SHALL BE INVESTED ACCORDING
TO POLICIES ESTABLISHED BY THE INVESTMENT COMMITTEE.

MONITORING PROCEDURES FOR DOMESTIC GRANTS FROM ENDOWMENT FUNDS

1. UPON RECEIPT OF A RECOMMENDATION FOR A GRANT FROM AN ENDOWMENT FUND
FOR GRANTS TO A US ORGANIZATION, JEWISH FEDERATION CONDUCTS A PRE-GRANT
REVIEW TO DETERMINE WHETHER THE FUNDS WILL BE USED FOR CHARITABLE
PURPOSES AND WHETHER THE ORGANIZATION IS A QUALIFIED PUBLIC CHARITY
UNDER IRS GUIDELINES.

2. IF JEWISH FEDERATION DETERMINES THAT THE FUNDS WILL BE USED FOR
CHARITABLE PURPOSES AND THAT THE ORGANIZATION IS A QUALIFIED PUBLIC
CHARITY UNDER IRS GUIDELINES, THE GRANT IS APPROVED.

3. IF JEWISH FEDERATION DETERMINES THAT THE FUNDS WILL BE USED FOR
OTHER THAN CHARITABLE PURPOSES OR THAT THE ORGANIZATION IS NOT A
QUALIFIED PUBLIC CHARITY UNDER IRS GUIDELINES, THE GRANT IS DECLINED
AND THE DONOR IS NOTIFIED IN WRITING.

DONOR ADVISED FUNDS GRANTMAKING AND MONITORING POLICIES AND PROCEDURES:
JEWISH FEDERATION MAINTAINS APPROXIMATELY 250 DONOR-ADVISED

Part IV Supplemental Information

"PHILANTHROPIC FUNDS". SUCH FUNDS MAY BE ESTABLISHED BY A MINIMUM GIFT TO JEWISH FEDERATION OF \$5,000. A SEPARATE FUND BEARING THE DONOR'S NAME (OR ANOTHER NAME CHOSEN BY THE DONOR) IS CREATED AND THE GIFT IS INVESTED.

A. JEWISH FEDERATION'S PHILANTHROPIC FUND PROGRAM IS GOVERNED BY JEWISH FEDERATION'S "PHILANTHROPIC FUND PROCEDURES AND OPERATION GUIDELINES" DETAILED BELOW.

B. PHILANTHROPIC FUNDS ARE ESTABLISHED BY A WRITTEN AGREEMENT BETWEEN JEWISH FEDERATION AND THE DONOR.

C. UPON THE ESTABLISHMENT OF THE NEW FUND, THE DONOR RECEIVES A "NEW FUND PACKAGE", WHICH INCLUDES A COVER LETTER, COPIES OF JEWISH FEDERATION'S PHILANTHROPIC FUND PROGRAM GUIDE, AND AN INVESTMENT MODEL SELECTION FORM.

D. THERE ARE SIX DIFFERENT INVESTMENT MODELS AND THE DONOR CAN CHOOSE TO INVEST IN ONE OR ALL SIX IN WHATEVER PERCENTAGES THEY PREFER.

E. TO RECOMMEND A GRANT FROM A PHILANTHROPIC FUND, A DONOR MUST SUBMIT A WRITTEN, SIGNED, RECOMMENDATION FORM OR SUBMIT THE RECOMMENDATION THROUGH A SECURE WEB PLATFORM USING UNIQUE LOGIN AND PASSWORD CREDENTIALS. THE DONOR MUST CONFIRM THAT THE DISTRIBUTION WOULD NOT SATISFY A LEGAL OBLIGATION OF THE DONOR AND THE DONOR'S WAIVER OF ALL BENEFITS IN CONNECTION WITH THE GRANT.

F. UPON RECEIPT OF THE GRANT RECOMMENDATION, VETTING AND DUE DILIGENCE IS PERFORMED FOR THE RECOMMENDED GRANTEE TO CONFIRM ITS STATUS AS A PUBLIC CHARITY ACCORDING TO IRS GUIDELINES. IF A PROPOSED GRANTEE IS NOT A PUBLIC CHARITY PER IRS GUIDELINES OR THE FUNDS WILL NOT BE USED FOR THE CHARITABLE PURPOSES OF JEWISH FEDERATION, THE GRANT IS NOT MADE. THE DONOR IS NOTIFIED BY LETTER AND COPIES OF SUCH LETTERS ARE KEPT ON FILE. IF THE PROPOSED GRANT IS TO A FOREIGN ORGANIZATION THAT

Part IV Supplemental Information

DOES NOT MAINTAIN AN "AMERICAN FRIENDS" OFFICE WITH 501(C)(3) STATUS,
THE GENERAL MONITORING PROCESS FOR FOREIGN GRANTS IS FOLLOWED.

G. CHECKS ARE DISTRIBUTED DIRECTLY TO THE CHARITIES WITH A TRANSMITTAL
LETTER. THE CHARITY IS NOTIFIED VIA THE TRANSMITTAL LETTER THAT IN
CASHING THE CHECK, THE CHARITY ACKNOWLEDGES NO TICKETS OR BENEFITS
INURED TO THE DONOR; NOR IS THE GIFT IN SATISFACTION OF A PLEDGE.

H. DONORS RECEIVE QUARTERLY STATEMENTS FOR THE PHILANTHROPIC FUND AND
MAY ALSO CHECK FUND BALANCES AND ACTIVITY DAILY VIA THE WEBSITE.

I. GRANTS FROM PHILANTHROPIC FUNDS TO INDIVIDUALS ARE NOT PERMITTED,
EXCEPT FOR SCHOLARSHIPS AND OTHER AWARDS AS PERMITTED IN ACCORDANCE
WITH INTERNAL REVENUE CODE. JEWISH FEDERATION'S SCHOLARSHIP FUND
GUIDELINES AND PROCEDURES LISTED BELOW SHALL GOVERN ANY SUCH AWARDS
FROM AN ENDOWMENT FUND THAT COULD REASONABLY BE CONSIDERED TO BE
DONOR-ADVISED.

SCHOLARSHIP FUND GUIDELINES AND PROCEDURES:

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

Part IV Supplemental Information

SCHEDULE I, PART III, COLUMN B:

THE NUMBER OF RECIPIENTS IS BASED ON THE NUMBER OF GRANTS TO INDIVIDUAL
RECIPIENTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number

23-1500085

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel

☒ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

☒ Compensation committee

☒ Independent compensation consultant

☒ Form 990 of other organizations

☐ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b	X	
2	X	
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2015

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule J (Form 990) 2015

23-1500085

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

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

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

Part III Supplemental Information

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

PART I, LINE 1A:

JEWISH FEDERATION SHALL PAY ALL REASONABLE AND NECESSARY EXPENSES TO ALLOW
THE CEO'S SPOUSE TO ACCOMPANY HER TO ONE CONFERENCE OR MISSION EACH YEAR,
PROVIDED THAT THERE IS AN APPROPRIATE PURPOSE THEREFORE IN THE FURTHERANCE
OF JEWISH FEDERATION'S EXEMPT FUNCTION.

PART I, LINE 4A:

4A - IRA M. SCHWARTZ, FORMER CEO - \$323,580 PAYMENT IN ACCORDANCE WITH
SEPARATION AGREEMENT.

Supplemental Information on Tax-Exempt Bonds

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**
▶ **Attach to Form 990.** ▶ **Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015
Open to Public
Inspection

Name of the organization **JEWISH FEDERATION OF GREATER PHILADELPHIA**

Employer identification number
23-150085

Part I	SEE PART VI FOR COLUMN (A) CONTINUATIONS											
(a) Issuer name		(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
COLORADO EDUC. AND A CULTURAL FACILITIES AUTH		84-0896727	NONE	09/04/12	27100000.	SEE PART VI		X		X		X
B												
C												
D												

Part II Proceeds									
		A	B		C		D		
1	Amount of bonds retired	440,000.							
2	Amount of bonds legally defeased								
3	Total proceeds of issue	27,100,000.							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds	27,100,000.							
12	Other unspent proceeds								
13	Year of substantial completion	2010							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use									
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
			X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule K (Form 990) 2015

23-1500085

Page 2

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government00							
	%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government00							
	%		%		%		%	
6 Total of lines 4 and 500							
	%		%		%		%	
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
	%		%		%		%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	X							
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X							
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	DEUTSCHE BANK							
c Term of hedge	3.9000000							
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

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Part IV Arbitrage (Continued)

	A		B		C		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								
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?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?	X							

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X							

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

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: COLORADO EDUC. AND CULTURAL FACILITIES AUTHORITY

SCHEDULE K, SUPPLEMENTAL INFORMATION: PART I, LINE A, COLUMN F: TO REFUND THEN OUTSTANDING TAX EXEMPT BONDS THAT FINANCED SCHWARTZ CAMPUS CAPITAL EXPENDITURES (2008 ISSUANCE) AND ISSUANCE COSTS, DEBT REDUCTION, AND CAPITAL IMPROVEMENTS AT KLEIN JCC AND 2100 ARCH STREET (2004 ISSUANCE).

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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**Open To Public
Inspection**

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

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 2015

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2015

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- ▶ **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 **JEWISH FEDERATION OF GREATER PHILADELPHIA** Employer identification number **23-1500085**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	18	16,583.	PROCEEDS LESS FEES
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	197	2,259,155.	FMV LESS FEES
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous	X	3	12,500.	FMV
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential	X	2	673,699.	FMV
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2015)

JEWISH FEDERATION OF GREATER

Schedule M (Form 990) (2015)

PHILADELPHIA

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Part II

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

SCHEDULE M, PART I, COLUMN (B):

THE JEWISH FEDERATION RECOGNIZES IN COLUMN B EACH UNIQUE NON-CASH CONTRIBUTION RECEIVED FROM A DONOR.

SCHEDULE M, LINE 32B:

THE JEWISH FEDERATION USES A THIRD PARTY IF A DONOR WISHES TO CONTRIBUTE A VEHICLE. THE THIRD PARTY PROCESSES AND SELLS THE VEHICLE THEN FORWARDS PROCEEDS TO JEWISH FEDERATION FOR APPLICATION TO THE DONOR'S ACCOUNT. THE THIRD PARTY PREPARES ALL IRS TAX SUBSTANTIATION REQUIREMENTS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

JEWISH FEDERATION OF GREATER
PHILADELPHIA

Employer identification number
23-1500085

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOR MORE THAN 115 YEARS, THE JEWISH FEDERATION OF GREATER PHILADELPHIA
HAS SERVED AS THE HUB OF GREATER PHILADELPHIA'S JEWISH COMMUNITY
THROUGH GIVING, INCLUSION AND TRADITION. THE JEWISH FEDERATION HAS
THREE MAIN GOALS: SERVING VULNERABLE POPULATIONS, SUPPORTING JEWISH
LIFE AND LEARNING AND FACILITATING COMMUNITY ENGAGEMENT, MAKING IT THE
ONE PLACE TO WHICH ALL COMMUNITY MEMBERS CAN TURN.

THROUGH A UNIQUE PARTNERSHIP OF PHILANTHROPISTS, ORGANIZATIONS,
VOLUNTEERS AND STAFF, THE JEWISH FEDERATION FILLS THREE KEY ROLES:
PHILANTHROPY, COMMUNITY CONVENER AND GRANT MAKER.

PHILANTHROPY:

WE STEWARD OUR DONORS' GENEROSITY TO ADDRESS JEWISH COMMUNAL PRIORITIES
TODAY (THROUGH THE JEWISH COMMUNITY FUND) AND FOR THE FUTURE (THROUGH
PLANNED GIVING VEHICLES).

COMMUNITY CONVENER:

WE CONNECT ORGANIZATIONS AND SYNAGOGUES IN GREATER PHILADELPHIA. THE
JEWISH FEDERATION ALSO BRING TOGETHER FAMILIES AND INDIVIDUALS FOR
SOCIAL ACTION ACTIVITIES, AFFINITY GROUPS, LEARNING AND LEADERSHIP
OPPORTUNITIES, ADVOCACY, EVENTS AND TRAVEL WITH A PURPOSE.

GRANT MAKER:

THE FUNDS WE RAISE ARE GRANTED TO PROGRAMS THAT MEET CRITICAL NEEDS
LOCALLY, IN ISRAEL AND AROUND THE WORLD. WE EVALUATE THE IMPACT OF THE
GRANTS TO ENSURE THEY ARE EFFECTIVELY ADDRESSING THE JEWISH
FEDERATION'S PRIORITIES.

Name of the organization JEWISH FEDERATION OF GREATER
PHILADELPHIA

Employer identification number
23-1500085

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

- 802 OLDER ADULTS AND PEOPLE WITH DISABILITIES WERE PROVIDED WITH
TRANSPORTATION

- 1,234 HOLOCAUST SURVIVORS RECEIVED BASIC NECESSITIES

- 3,549 LOCAL OLDER ADULTS ATTENDED SOCIALIZATION PROGRAMS CONNECTING
THEM WITH THEIR PEERS AND ENGAGING THEM MENTALLY AND PHYSICALLY

- 1,022 VULNERABLE JEWS RECEIVED AN EMERGENCY GRANT HELPING THEM
THROUGH A FINANCIAL HARDSHIP

- 1,155 HOME MODIFICATIONS AND REPAIRS ENABLING OLDER ADULTS TO STAY IN
THEIR OWN HOMES

- 43 SYNAGOGUES AND ORGANIZATIONS COLLECTED 50,650 POUNDS OF FOOD

- 563 ISRAELI ADULTS LIVING WITH DISABILITIES RECEIVED SPECIALIZED
VOCATIONAL TRAINING

IN ADDITION, AMOUNTS ARE INCLUDED THAT WERE DISTRIBUTED VIA
DONOR-DESIGNATED CAMPAIGN SUPPORT. THESE AMOUNTS WERE DIRECTLY
DISTRIBUTED TO PROGRAMS IN ADDITION TO THOSE AMOUNTS DISTRIBUTED
THROUGH THE ANNUAL GRANT PROCESS. THE OUTCOMES FOR THE AMOUNTS
DISTRIBUTED THROUGH THE ANNUAL GRANT PROCESS ARE LISTED ABOVE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

EXPERIENCES

- 8,460 JEWISH CHILDREN IN THE FORMER SOVIET UNION RECEIVED
SCHOLARSHIPS TO OVERNIGHT CAMP

- 600 TEENS PARTICIPATED IN JEWISH-THEMED SOCIAL AND EDUCATIONAL
PROGRAMS

- 650 JEWISH YOUNG ADULTS IN GREATER PHILADELPHIA PARTICIPATED IN
LEADERSHIP TRAINING

Name of the organization JEWISH FEDERATION OF GREATER
PHILADELPHIA

Employer identification number
23-1500085

- 5,498 CHILDREN RECEIVED FREE JEWISH-THEMED BOOKS AND MUSIC

- 923 JEWISH EDUCATORS PARTICIPATED IN PROFESSIONAL DEVELOPMENT

- 2,700 PEOPLE IN GREATER PHILADELPHIA WERE INVOLVED IN HOLOCAUST
EDUCATION PROGRAMMING

- 8 ALLIANCES OF SYNAGOGUES, COMMUNITY VOLUNTEERS, AND REPRESENTATIVES
FROM JEWISH ORGANIZATIONS CREATED AN INSPIRED JEWISH COMMUNITY AND
OFFER UNIQUE JEWISH PROGRAMMING

IN ADDITION, AMOUNTS ARE INCLUDED THAT WERE DISTRIBUTED VIA
DONOR-DESIGNATED CAMPAIGN SUPPORT. THESE AMOUNTS WERE DIRECTLY
DISTRIBUTED BY JEWISH FEDERATION TO PROGRAMS IN ADDITION TO THOSE
AMOUNTS DISTRIBUTED THROUGH THE ANNUAL GRANT PROCESS. THE OUTCOMES FOR
THE AMOUNTS DISTRIBUTED THROUGH THE ANNUAL GRANT PROCESS ARE LISTED
ABOVE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PROGRAM OPERATIONS ARE PRIMARILY FUNDS USED TO ADMINISTER, MEASURE AND
EVALUATE THE IMPACT OF OUR PROGRAMS ON THE COMMUNITY.

EXPENSES \$ 4,103,095. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

OTHER PROGRAM SUPPORT REPRESENTS GRANTS AND OTHER EXPENSES TO FURTHER
THE MISSION OF JEWISH FEDERATION.

EXPENSES \$ 830,397. INCLUDING GRANTS OF \$ 95,000. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

CAYMAN ISLANDS, BERMUDA, BRITISH VIRGIN IS

FORM 990, PART VI, SECTION A, LINE 2:

Name of the organization	JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number 23-1500085
--------------------------	--	--

AARON, BENNETT L. / AARON, CAROL - FAMILY RELATIONSHIP

BARRACK, LEONARD / BARRACK, LYNNE / BARRACK, JEFFREY - FAMILY RELATIONSHIP

BERMAN, BRYNA / BERMAN, SHARYN - FAMILY RELATIONSHIP

BLASKEY, MARK / BLASKEY, PENNI- FAMILY RELATIONSHIP

CONSTON, SHIRLEY / CONSTON, STUART - FAMILY RELATIONSHIP

DISHLER, BERNARD / DISHLER, LANA - FAMILY RELATIONSHIP

ERLBAUM, GARY / ERLBAUM DANIEL / ERLBAUM, SCOTT - FAMILY RELATIONSHIP

FISHMAN, ANNABELLE / FISHMAN, MARK - FAMILY RELATIONSHIP

GOLD, DAVID / GOLD, MORRIE - FAMILY RELATIONSHIP

GOLDER, ROBERT B. / GOLDER-SAFT, ELLYN - FAMILY RELATIONSHIP

KRAMER, ARNOLD H. / KRAMER, KAREN G. - FAMILY RELATIONSHIP

LEVIN, JONATHAN / LEVIN, SHARON - FAMILY RELATIONSHIP

LINCOW, BARBARA / COLE, JASON - FAMILY RELATIONSHIP

LIPTON, ADELE / LIPTON, IRWIN - FAMILY RELATIONSHIP

MINKOFF, JAY B. / MINKOFF, SARA - FAMILY RELATIONSHIP

PERILSTEIN, COOKIE / WARGON, MARGIE/ PERILSTEIN, JAYNE- FAMILY RELATIONSHIP

ROSENBERG, PETER / ROSENBERG, JOYCE - FAMILY RELATIONSHIP

ROSS, LYN / ROSS, MICHAEL J. FAMILY RELATIONSHIP

SCHNEIROV, ALLAN / SCHNEIROV, MIRIAM - FAMILY RELATIONSHIP

SHAPIRO, RAYMOND / SHAPIRO, JUDIE - FAMILY RELATIONSHIP

FORM 990, PART VI, SECTION A, LINE 7B:

RELATIONSHIP BETWEEN THE JEWISH FEDERATION'S BOARD OF DIRECTORS AND BOARD
OF TRUSTEES:

THE JEWISH FEDERATION IS GOVERNED BY THE BOARD OF DIRECTORS. ACCORDING TO
JEWISH FEDERATION'S BY-LAWS, ARTICLE 4.01, JEWISH FEDERATION'S BOARD OF
TRUSTEES HAS THE POWER TO:

- APPROVE JEWISH FEDERATION'S BUDGET

Name of the organization **JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number
23-1500085

- APPROVE JEWISH FEDERATION'S ALLOCATIONS
- ELECT OFFICERS AND TRUSTEES
- RESOLVE MAJOR POLICY ISSUES REFERRED BY THE BOARD OF DIRECTORS
- EXPLORE AND PROVIDE DIRECTION FOR DEALING WITH MAJOR COMMUNITY CONCERNS
- APPROVE LONG RANGE PLANS FOR THE JEWISH FEDERATION
- AMEND JEWISH FEDERATION'S BY-LAWS

IF THE TRUSTEES DO NOT APPROVE A DECISION MADE BY THE DIRECTORS, THE ITEM GOES BACK TO THE DIRECTORS FOR FURTHER DISCUSSION AND REVISION. THE ITEM IS THEN BROUGHT BACK TO THE TRUSTEES FOR ANOTHER VOTE. THIS PROCESS CAN CONTINUE UNTIL THE MATTER HAS BEEN RESOLVED.

THE BOARD OF TRUSTEES HAS UP TO 250 MEMBERS, INCLUDING ALL DIRECTORS, ALL PAST JEWISH FEDERATION CAMPAIGN CHAIRS, AND THE PRESIDENT OF EACH LOCAL BENEFICIARY AGENCY. NON-VOTING HONORARY TRUSTEES MAY PARTICIPATE IN DISCUSSION PRIOR TO A VOTE.

FORM 990, PART VI, SECTION B, LINE 11:

EACH YEAR THE JEWISH FEDERATION HAS VARIOUS TAX FILING REQUIREMENTS. THE TAX RETURNS ARE COMPLETED BY A TAX ACCOUNTING FIRM USING INFORMATION AUDITED BY AN INDEPENDENT AUDITING FIRM. THESE CAN BE THE SAME OR SEPARATE FIRMS AS SELECTED BY THE AUDIT COMMITTEE OF JEWISH FEDERATION. THE 990 IS PRESENTED BY THE TAX ACCOUNTING FIRM TO THE AUDIT COMMITTEE FOR REVIEW AND APPROVAL. AFTER THEIR REVIEW, THE 990 PROVIDED TO THE BOARD OF DIRECTORS VIA E-MAIL OR MAIL FOR COMMENT AND THEN FILED.

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

INTERNAL PROCEDURES FOR THE REVIEW OF FEDERATION'S CONFLICT OF INTEREST STATEMENTS

PROCEDURE FOR BOARD OF TRUSTEES AND BOARD OF DIRECTORS:

Name of the organization **JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number
23-1500085

1. PRIOR TO THE FIRST BOARD OF TRUSTEES MEETING AND THE FIRST BOARD OF DIRECTORS MEETING FOR EACH FISCAL YEAR, JEWISH FEDERATION DISTRIBUTES THE STATEMENT OF ETHICAL GUIDELINES TO ALL NEW AND RENEWING BOARD MEMBERS. BOARD MEMBERS ARE ASKED TO READ THE DOCUMENT, COMPLETE AND SIGN THE CONFLICT OF INTEREST STATEMENT, AND RETURN THE COMPLETED DOCUMENT TO JEWISH FEDERATION. THIS CAN BE DONE ONLINE OR VIA US MAIL.

2. ONE MONTH AFTER THE CONFLICT OF INTEREST STATEMENT IS DISTRIBUTED TO ALL BOARD MEMBERS, THE DOCUMENT IS SENT A SECOND TIME TO ANY BOARD MEMBERS WHO DID NOT COMPLETE, SIGN AND RETURN THE CONFLICT OF INTEREST STATEMENT.

3. ALL RESPONSES ON THE CONFLICT OF INTEREST STATEMENT ARE COMPILED AND THEN REVIEWED BY THE CHIEF EXECUTIVE OFFICER AND THE CHIEF FINANCIAL OFFICER. A COMPREHENSIVE REPORT IS PROVIDED TO THE ETHICS COMMITTEE FOR REVIEW AND ANY REQUIRED ACTION STEPS.

4. THE SIGNED CONFLICT OF INTEREST STATEMENTS ARE KEPT ON FILE FOR A PERIOD OF 7 YEARS.

PROCEDURE FOR JEWISH FEDERATION EMPLOYEES:

1. IN CONCURRENCE WITH THE BOARD OF TRUSTEES AND BOARD OF DIRECTORS, THE DIRECTOR OF HUMAN RESOURCES DISTRIBUTES THE STATEMENT OF ETHICAL GUIDELINES VIA EMAIL AND REQUESTS THAT ALL EMPLOYEES REVIEW THE DOCUMENT AND COMPLETE AND SIGN THE CONFLICT OF INTEREST STATEMENT VIA ELECTRONIC SURVEY.

2. ALL JEWISH FEDERATION EMPLOYEE RESPONSES ARE REVIEWED BY THE DIRECTOR OF HUMAN RESOURCES AND THE CHIEF FINANCIAL OFFICER. A COMPREHENSIVE REPORT IS PROVIDED TO THE ETHICS COMMITTEE FOR REVIEW AND ANY REQUIRED ACTION STEPS.

3. THE ELECTRONIC RESPONSES TO THE CONFLICT OF INTEREST STATEMENTS ARE KEPT ON FILE FOR A PERIOD OF 7 YEARS.

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

Name of the organization **JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number
23-1500085

PROCESS FOR DETERMINING COMPENSATION:

AS IS THE CASE WITH ALL EMPLOYEES, THE JEWISH FEDERATION IS COMMITTED TO PROVIDING MEMBERS OF THE EXECUTIVE MANAGEMENT TEAM (INCLUDING CHIEF EXECUTIVE OFFICER, OFFICERS AND KEY EMPLOYEES) WITH A FAIR AND REASONABLE BASE PAY OPPORTUNITY; REFLECTIVE OF EACH JOB'S VALUE TO THE ORGANIZATION AND CONSISTENT WITH PREVAILING LABOR MARKET/INDUSTRY COMPENSATION PRACTICES. PAY DECISIONS ARE MADE ON THE BASIS OF EMPLOYEES' QUALIFICATIONS AND ACTUAL PERFORMANCE.

THE PROCESS FOR DETERMINING EXECUTIVE COMPENSATION INCLUDES THREE ELEMENTS:

(1) USE OF DATA TO DETERMINE COMPARABLE COMPENSATION, (2) REVIEW AND APPROVAL BY THE JEWISH FEDERATION'S COMPENSATION COMMITTEE, AND (3) DOCUMENTATION AND RECORDKEEPING.

1. USE OF DATA TO DETERMINE COMPARABLE COMPENSATION: JEWISH FEDERATION WILL REVIEW CEO COMPENSATION DATA ON AN ANNUAL BASIS AND PROVIDE A SUMMARY OF THE DATA TO THE COMPENSATION COMMITTEE. CEO DATA WILL BE PROVIDED THROUGH JEWISH FEDERATIONS OF NORTH AMERICA'S ANNUAL EXECUTIVE COMPENSATION SURVEY AND OTHER SIMILARLY SITUATED ORGANIZATIONS. DATA FOR OTHER EXECUTIVE POSITIONS WILL BE COLLATED BY AN INDEPENDENT CONSULTANT AT LEAST EVERY TWO YEARS.

2. REVIEW AND APPROVAL OF EXECUTIVE COMPENSATION:

A) CEO: THE COMPENSATION COMMITTEE WILL DISCUSS, NO LATER THAN AUGUST, UNLESS EMPLOYEE CONTRACT STATES OTHERWISE, THE PRESIDENT'S RECOMMENDATION REGARDING THE CEO'S SALARY AND BONUS. THE COMMITTEE WILL BE PROVIDED WITH COMPARABLE DATA PRIOR TO APPROVING ANY RECOMMENDATIONS. AT THE TIME OF THE DISCUSSION AND DECISION CONCERNING THE CEO'S COMPENSATION, THE CEO SHOULD NOT BE PRESENT. AT ALL TIMES COMMITTEE MEMBERS MUST DISCLOSE ANY CONFLICTS OF INTEREST.

B) OTHER EXECUTIVES: THE COMPENSATION COMMITTEE WILL ALSO DISCUSS, NO LATER

Name of the organization **JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Employer identification number
23-1500085

THAN AUGUST, THE CEO'S RECOMMENDATIONS FOR EXECUTIVE SALARIES AND BONUSES WHICH BECOME EFFECTIVE THE FIRST FULL PAYROLL IN SEPTEMBER. THIS COMMITTEE WILL ALSO REVIEW ALL MULTI-YEAR CONTRACTS FOR ANY NEW MEMBER OF THE EXECUTIVE TEAM. NO MEMBER OF THE EXECUTIVE TEAM, OTHER THAN THE CEO, MAY BE PRESENT DURING THIS DISCUSSION. AT ALL TIMES COMMITTEE MEMBERS MUST DISCLOSE ANY CONFLICTS OF INTEREST.

3. DOCUMENTATION AND RECORDKEEPING: MINUTES OF COMPENSATION COMMITTEE MEETINGS WILL BE COMPLETED NO LATER THAN 60 DAYS FOLLOWING DISCUSSIONS AND DECISION-MAKING. EXECUTIVE PERFORMANCE APPRAISALS, BONUSES AND SALARY ADJUSTMENTS REMAIN ON FILE IN THE HUMAN RESOURCES DEPARTMENT.

FORM 990, PART VI, SECTION C, LINE 19:

PUBLIC DISCLOSURE:

JEWISH FEDERATION BELIEVES IN FULL DISCLOSURE AND TRANSPARENCY. THEREFORE, AT ANY TIME, ANYONE CAN REQUEST A COPY OF FORM 990, FORM 990T, AUDITED FINANCIAL STATEMENTS, FORM 1023, GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY AND IT WILL BE PROVIDED TO THEM. IT IS OUR POLICY TO RECEIVE THE REQUEST IN WRITING, SIGNED BY THE REQUESTOR, TO THE OFFICE OF THE CHIEF EXECUTIVE OFFICER OR THE OFFICE OF THE CHIEF FINANCIAL OFFICER. WE WILL RELEASE A COPY WITHIN A REASONABLE TIME BUT NOT TO EXCEED TEN BUSINESS DAYS. OUR ANNUAL AUDITED FINANCIAL STATEMENTS AND OUR FORM 990 MAY ALSO BE FOUND ON OUR WEBSITE WWW.JEWISHPHILLY.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

EQUITY ON LOSS OF EXPONENT	-243,714.
CHANGE IN VALUE - NON-PARTICIPATING ASSETS	5,208,643.
CHANGE IN VALUE - CHARITABLE REMAINDER TRUST	33,388.
CHANGE IN VALUE - CHARITABLE GIFT ANNUITIES	-382,235.

Name of the organization JEWISH FEDERATION OF GREATER
PHILADELPHIAEmployer identification number
23-1500085

PROVISION FOR UNCOLLECTIBLES	-378,437.
LOSS ON INTEREST RATE SWAP	-38,339.
PENSION-RELATED CHANGES OTHER THAN NET PERIODIC COSTS	-4,961,265.
INVESTMENT INCOME FROM PARTNERSHIP	24,204.
FORFEITED GRANTS	27,895.
IN-KIND EXPENSES	-995,812.
TOTAL TO FORM 990, PART XI, LINE 9	-1,705,672.

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

2015

**Open to Public
Inspection**

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

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
FOUNDATION FOR JEWISH DAY SCHOOLS OF GREATER PHILADELPHIA - 23-3087655, 2100 ARCH STREET, PHILADELPHIA, PA 19103	TUITION ASSISTANCE/ JEWISH EDUCATION	PENNSYLVANIA	501(C)(3)	7	JEWISH FEDERATION OF GREATER PHILADELPHIA		X

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

Schedule R (Form 990) 2015

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule R (Form 990) 2015

23-1500085 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	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
JEWISH EXPONENT - 23-0734230 2100 ARCH STREET PHILADELPHIA, PA 19103	PUBLISHING	PA	JEWISH FEDERATION OF GR. PHILA.	C CORP	-243,714.	-2,958,539.	100%	X	
CHARITABLE REMAINDER TRUSTS (24) 2100 ARCH STREET PHILADELPHIA, PA 19103	CHARITABLE SPLIT INTEREST TRUST	PA	JEWISH FEDERATION OF GR. PHILA.	TRUST				X	

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

Schedule R (Form 990) 2015

23-1500085 Page 3

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a 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	
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d X	
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j X	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l X	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p 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
s Other transfer of cash or property from related organization(s)	1s	X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) JEWISH EXPONENT	A	57,890.	ACCRUAL
(2) JEWISH EXPONENT	D	1,800,000.	FAIR MARKET VALUE
(3) JEWISH EXPONENT	Q	85,608.	ACCRUAL
(4) JEWISH EXPONENT	M	173,485.	ACCRUAL
(5)			
(6)			

Part VI

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.

[illegible]

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

2016 ESTIMATED TAX FILING INSTRUCTIONS

FORM 990-W

FOR THE YEAR ENDING

August 31, 2017

Prepared for	Jewish Federation of Greater Philadelphia 2100 Arch Street Philadelphia, PA 19103																											
Prepared by	RSM US LLP 751 Arbor Way Suite 200 Blue Bell, PA 19422																											
Amount of tax	<table><tr><td>Total Estimated Tax</td><td>\$</td><td>196,000</td></tr><tr><td>Less credit from prior year</td><td>\$</td><td>44,030</td></tr><tr><td>Less amount already paid on 2016 estimate</td><td>\$</td><td>0</td></tr><tr><td>Balance due</td><td>\$</td><td>151,970</td></tr></table> <p>Payable in full or in installments as follows:</p> <table><thead><tr><th>Installment</th><th>Amount</th><th>Due Date</th></tr></thead><tbody><tr><td>No. 1</td><td>\$ None required</td><td></td></tr><tr><td>No. 2</td><td>\$ None required</td><td></td></tr><tr><td>No. 3</td><td>\$ None required</td><td></td></tr><tr><td>No. 4</td><td>\$ 151,970</td><td>August 15, 2017</td></tr></tbody></table>	Total Estimated Tax	\$	196,000	Less credit from prior year	\$	44,030	Less amount already paid on 2016 estimate	\$	0	Balance due	\$	151,970	Installment	Amount	Due Date	No. 1	\$ None required		No. 2	\$ None required		No. 3	\$ None required		No. 4	\$ 151,970	August 15, 2017
Total Estimated Tax	\$	196,000																										
Less credit from prior year	\$	44,030																										
Less amount already paid on 2016 estimate	\$	0																										
Balance due	\$	151,970																										
Installment	Amount	Due Date																										
No. 1	\$ None required																											
No. 2	\$ None required																											
No. 3	\$ None required																											
No. 4	\$ 151,970	August 15, 2017																										
Make check payable to	Payments should be made using the Electronic Federal Tax Payment System (EFTPS).																											
Mail voucher and check (if applicable) to	Not applicable																											
Special Instructions																												

Form **990-W****Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

(Worksheet)Department of the Treasury
Internal Revenue Service(and on Investment Income for Private Foundations) **FORM 990-T**
(Keep for your records. Do not send to the Internal Revenue Service.)**2016**

1	Unrelated business taxable income expected in the tax year	1	
2	Tax on the amount on line 1. See instructions for tax computation	2	
3	Alternative minimum tax (see instructions)	3	
4	Total. Add lines 2 and 3	4	
5	Estimated tax credits (see instructions)	5	
6	Subtract line 5 from line 4	6	
7	Other taxes (see instructions)	7	
8	Total. Add lines 6 and 7	8	
9	Credit for federal tax paid on fuels (see instructions)	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	
b	Enter the tax shown on the 2015 return (see instructions). Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	194,049.
c	2016 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	196,000.

	(a)	(b)	(c)	(d)
11 Installment due dates (see instructions)	11			08/15/17
12 Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions)	12			196,000.
13 2015 Overpayment (see instructions)	13			44,030.
14 Payment due (Subtract line 13 from line 12)	14			151,970.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2016)

ESTIMATED TAX	196,000.
OVERPAYMENT APPLIED	44,030.
AMOUNT DUE	151,970.

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

August 31, 2016

Prepared for	Jewish Federation of Greater Philadelphia 2100 Arch Street Philadelphia, PA 19103
Prepared by	RSM US LLP 751 Arbor Way Suite 200 Blue Bell, PA 19422
Amount due or refund	Overpayment of \$44,030. The entire overpayment has been applied to the estimated tax payments.
Make check payable to	No amount is due.
Mail tax return and check (if applicable) to	Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027
Return must be mailed on or before	July 17, 2017
Special Instructions	The return should be signed and dated.

EXTENDED TO JULY 17, 2017

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No. 1545-0687

For calendar year 2015 or other tax year beginning SEP 1, 2015, and ending AUG 31, 2016**2015**Department of the Treasury
Internal Revenue Service▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) JEWISH FEDERATION OF GREATER PHILADELPHIA	D Employer identification number (Employees' trust, see instructions.) 23-1500085
B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)		Number, street, and room or suite no. If a P.O. box, see instructions. 2100 ARCH STREET	E Unrelated business activity codes (See instructions.) 531390
C Book value of all assets at end of year 300527562.		City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA 19103	
F Group exemption number (See instructions.) ▶			
G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust			

H Describe the organization's primary unrelated business activity. ▶ **SEE STATEMENT 1**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **JEROME P. NACHLIS, CFO & CAO** Telephone number ▶ **215-832-0807**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from partnerships and S corporations (attach statement)		5 -24,204.		-24,204.
6 Rent income (Schedule C)		6 145,562.	101,896.	43,666.
7 Unrelated debt-financed income (Schedule E)		7 1,748,484.	1,186,068.	562,416.
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)...		8 57,890.	68,036.	-10,146.
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13 1,927,732.	1,356,000.	571,732.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	571,732.
31 Net operating loss deduction (limited to the amount on line 30)	31	
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	571,732.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	570,732.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☒

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. JEWISH FEDERATION OF GREATER PHILADELPHIA	Employer identification number (EIN) or 23-1500085
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 ARCH STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19103	

Enter the Return code for the return that this application is for (file a separate application for each return)

07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JEROME P. NACHLIS, CFO & CAO

- The books are in the care of ► **2100 ARCH STREET - PHILADELPHIA, PA 19103**

Telephone No. ► **215-832-0807**

Fax No. ► ☐

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **JULY 15, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year _____ or
- ☒ tax year beginning **SEP 1, 2015**, and ending **AUG 31, 2016**.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ 195,000.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 238,079.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**JEWISH FEDERATION OF GREATER
PHILADELPHIA**

23-1500085

Page 2

Part III Tax Computation**35 Organizations Taxable as Corporations.** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☐ See instructions and:**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34

35c 194,049.

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

37 Proxy tax. See instructions

37

38 Alternative minimum tax

38

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies

39 194,049.

Part IV Tax and Payments**40a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

40a

b Other credits (see instructions)

40b

c General business credit. Attach Form 3800

40c

d Credit for prior year minimum tax (attach Form 8801 or 8827)

40d

e Total credits. Add lines 40a through 40d

40e

41 Subtract line 40e from line 39

41

194,049.

42 Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)

42

43 Total tax. Add lines 41 and 42

43

194,049.

44a Payments: A 2014 overpayment credited to 2015

44a

8,079.

b 2015 estimated tax payments

44b

230,000.

c Tax deposited with Form 8868

44c

d Foreign organizations: Tax paid or withheld at source (see instructions)

44d

e Backup withholding (see instructions)

44e

f Credit for small employer health insurance premiums (Attach Form 8941)

44f

g Other credits and payments:☐ Form 2439☐ Form 4136 ☐ Other

Total

44g

45 Total payments. Add lines 44a through 44g

45

238,079.

46 Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐

46

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed

47

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid

48

44,030.

49 Enter the amount of line 48 you want: Credited to 2016 estimated tax

44,030.

Refunded

49

0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)**1** At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial

Yes

No

Accounts. If YES, enter the name of the foreign country here

SEE STATEMENT 3

X

2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.

X

3 Enter the amount of tax-exempt interest received or accrued during the tax year \$**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation N/A**1** Inventory at beginning of year

1

2 Purchases

2

3 Cost of labor

3

4a Additional section 263A costs (att. schedule)

4a

b Other costs (attach schedule)

4b

5 Total. Add lines 1 through 4b

5

6 Inventory at end of year

6

7 Cost of goods sold. Subtract line 6

7

from line 5. Enter here and in Part I, line 2

8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?

Yes

No

Sign Here

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

Signature of officer

Date

PRESIDENT & CEO

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No**Paid Preparer Use Only**

Print/Type preparer's name

LYNNE JOHNSON

Preparer's signature

Date

Check ☐ if self-employed

PTIN

P00757336

Firm's name RSM US LLP

Firm's EIN

42-0714325

Firm's address 751 ARBOR WAY, SUITE 200

BLUE BELL, PA 19422

Phone no.

215.641.8600

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)(see instructions)

1. Description of property

(1) PORTIONS OF 2100 ARCH STREET RENTED TO NON-PROFIT
 (2) ORGANIZATION OUTSIDE THE MISSION OF THE JEWISH FEDERATION
 (3)
 (4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
		SEE STATEMENT 4
(1)	145,562.	101,896.
(2)		
(3)		
(4)		
Total 0.	Total 145,562.	
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 145,562.		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) 101,896.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
			STATEMENT 5	STATEMENT 6
(1) SCHWARTZ CAMPUS		1,748,484.	239,333.	946,735.
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 33,452,967.	25,346,374.	100.00%	1,748,484.	1,186,068.
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A). 1,748,484.	Enter here and on page 1, Part I, line 7, column (B). 1,186,068.
Total dividends-received deductions included in column 8				0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1) JEWISH EXPONENT	23-0734230				
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
				STATEMENT 7
(1)		57,890.	57,890.	68,036.
(2)				
(3)				
(4)				
Totals			57,890.	68,036.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Enter here and on page 1, Part I, line 9, column (A).				Enter here and on page 1, Part I, line 9, column (B).
Totals	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Enter here and on page 1, Part I, line 10, col. (A).		Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0.	0.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Enter here and on page 1, Part I, line 11, col. (A).		Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT	1
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PASS-THROUGH INCOME FROM PARTNERSHIPS
RENTAL INCOME FROM CONTROLLED ORGANIZATION
RENTAL INCOME FROM DEBT FINANCED PROPERTY

TO FORM 990-T, PAGE 1

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	2
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PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
UNRELATED BUSINESS INCOME/LOSS FROM VARIOUS PARTNERSHIP INVESTMENTS	-24,204.	0.	-24,204.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-24,204.	0.	-24,204.

FORM 990-T	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT	3
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NAME OF COUNTRY

CAYMAN ISLANDS
BERMUDA
BRITISH VIRGIN IS

FORM 990-T	DEDUCTIONS CONNECTED WITH RENTAL INCOME	STATEMENT	4
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DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
VARIOUS RENTAL EXPENSES		101,896.	
- SUBTOTAL -	1		101,896.
TOTAL TO FORM 990-T, SCHEDULE C, COLUMN 3			101,896.

FORM 990-T	SCHEDULE E - DEPRECIATION DEDUCTION	STATEMENT	5
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DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		239,333.	
- SUBTOTAL -	1		239,333.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(A)			239,333.

FORM 990-T	SCHEDULE E - OTHER DEDUCTIONS	STATEMENT	6
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DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
INSURANCE		396,838.	
INTEREST		246,820.	
UTILITIES		100,578.	
PERSONNEL / ADMINISTRATION		118,739.	
REPAIRS AND MAINTENANCE		50,437.	
MISCELLANEOUS		33,323.	
- SUBTOTAL -	1		946,735.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(B)			946,735.

FORM 990-T	SCHEDULE F - DEDUCTIONS OF CONTROLLED ORGANIZATIONS DIRECTLY CONNECTED WITH COLUMN 10 INCOME	STATEMENT	7
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DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
VARIOUS RENTAL EXPENSES		68,036.	
- SUBTOTAL -	1		68,036.
TOTAL OF FORM 990-T, SCHEDULE F, COLUMN 11			68,036.

**Return by a U.S. Transferor of Property
to a Foreign Corporation**

OMB No. 1545-0026

► **Information about Form 926 and its separate instructions is at www.irs.gov/form926.**
► **Attach to your income tax return for the year of the transfer or distribution.**

Attachment
Sequence No. **128**

Part I U.S. Transferor Information (see instructions)

Name of transferor JEWISH FEDERATION OF GREATER PHILADELPHIA	Identifying number (see instructions) 23-1500085
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1 If the transferor was a corporation, complete questions 1a through 1d.

a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 or fewer domestic corporations? ☐ Yes ☒ No

b Did the transferor remain in existence after the transfer? ☒ Yes ☐ No
If not, list the controlling shareholder(s) and their identifying number(s):

Controlling shareholder	Identifying number

c If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? ☐ Yes ☒ No
If not, list the name and employer identification number (EIN) of the parent corporation:

Name of parent corporation	EIN of parent corporation

d Have basis adjustments under section 367(a)(5) been made? ☐ Yes ☒ No

2 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 2a through 2d.

a List the name and EIN of the transferor's partnership:

Name of partnership	EIN of partnership

b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? ☐ Yes ☐ No

c Is the partner disposing of its **entire** interest in the partnership? ☐ Yes ☐ No

d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? ☐ Yes ☐ No

Part II Transferee Foreign Corporation Information (see instructions)

3 Name of transferee (foreign corporation) TIGER LEGATUS OFFSHORE FUND, LTD	4a Identifying number, if any
--	--------------------------------------

5 Address (including country) C/O ELIAN FIDUCIARY SERVICES (CAYMAN) LTD, 89 NEXUS WAY, GRAND CAYMAN, KY1-9007 CAYMAN ISLANDS	4b Reference ID number 86
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6 Country code of country of incorporation or organization
CJ

7 Foreign law characterization (see instructions)
CORPORATION

8 Is the transferee foreign corporation a controlled foreign corporation? ☐ Yes ☒ No

Part III Information Regarding Transfer of Property (see instructions)

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	05/01/2016		3,000,000.		
Stock and securities					
Installment obligations, account receivables or similar property					
Foreign currency or other property denominated in foreign currency					
Inventory					
Assets subject to depreciation recapture (see Temp. Regs. sec. 1.367(a)-4T(b))					
Tangible property used in trade or business not listed under another category					
Intangible property					
Property to be leased (as described in final and temp. Regs. sec. 1.367(a)-4(c))					
Property to be sold (as described in Temp. Regs. sec. 1.367(a)-4T(d))					
Transfers of oil and gas working interests (as described in Temp. Regs. sec. 1.367(a)-4T(e))					
Other property					

Supplemental Information Required To Be Reported (see instructions):

Part IV Additional Information Regarding Transfer of Property (see instructions)**9** Enter the transferor's interest in the foreign transferee corporation before and after the transfer:(a) Before .0000 % (b) After 1.7389 %**10** Type of nonrecognition transaction (see instructions) **SECTION 351****11** Indicate whether any transfer reported in Part III is subject to any of the following:

- | | | |
|--|------------------------------|--|
| a Gain recognition under section 904(f)(3) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b Gain recognition under section 904(f)(5)(F) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c Recapture under section 1503(d) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d Exchange gain under section 987 | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

12 Did this transfer result from a change in the classification of the transferee to that of a foreign corporation? ☐ Yes ☒ No**13** Indicate whether the transferor was required to recognize income under final and Temporary Regulations sections 1.367(a)-4 through 1.367(a)-6 for any of the following:

- | | | |
|---|------------------------------|--|
| a Tainted property | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b Depreciation recapture | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c Branch loss recapture | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d Any other income recognition provision contained in the above-referenced regulations | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

14 Did the transferor transfer assets which qualify for the trade or business exception under section 367(a)(3)? ☐ Yes ☒ No**15 a** Did the transferor transfer foreign goodwill or going concern value as defined in Temporary Regulations section 1.367(a)-1T(d)(5)(iii)? ☐ Yes ☒ No**b** If the answer to line 15a is "Yes," enter the amount of foreign goodwill or going concern value transferred **\$** _____**16** Was cash the only property transferred? ☒ Yes ☐ No**17 a** Was intangible property (within the meaning of section 936(h)(3)(B)) transferred as a result of the transaction? ☐ Yes ☒ No**b** If "Yes," describe the nature of the rights to the intangible property that was transferred as a result of the transaction:

Form 926 (Rev. 12-2013)

2015 TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 109

FOR THE YEAR ENDING

August 31, 2016

Prepared for	Jewish Federation of Greater Philadelphia 2100 Arch Street Philadelphia, PA 19103
Prepared by	RSM US LLP 751 arbor way suite 200 blue bell, pa 19422
To be signed and dated by	The authorized individual(s).
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	Not Applicable
Mail tax return and check (if applicable) to	Franchise Tax Board P.O. Box 942857 Sacramento, CA 94257-0500
Return must be mailed on or before	August 15, 2017
Special Instructions	

2015

California Exempt Organization Business Income Tax Return

Calendar Year 2015 or fiscal year beginning (mm/dd/yyyy) **09/01/2015**, and ending (mm/dd/yyyy) **08/31/2016**

Corporation/Organization name **JEWISH FEDERATION OF GREATER PHILADELPHIA**

California corporation number
9607931

Additional information. See instructions.

FEIN
23-1500085

Street address (suite/room no.)
2100 ARCH STREET

PMB no.

City (If the corporation has a foreign address, see instructions.)
PHILADELPHIA

State
PA

ZIP code
19103

Foreign country name

Foreign province/state/county

Foreign postal code

- A** First Return Filed? ☐ Yes ☒ No
- B** Is this an education IRA within the meaning of R&TC Section 23712? ☐ Yes ☒ No
- C** Is the organization under audit by the IRS or has the IRS audited in a prior year? ☐ Yes ☒ No
- D** Final Return?
☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
 Enter date (mm/dd/yyyy) _____
- E** Amended Return ☐ Yes ☒ No
- F** Accounting Method Used: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other
- G** Nature of trade or business **PASS-THROUGH INCOME**

- H** Is the organization a non-exempt charitable trust as described in IRC Section 4947(a)(1)? ☐ Yes ☒ No
- I** Is this organization claiming any former; Enterprise Zone (EZ), Los Angeles Revitalization Zone (LARZ), Local Agency Military Base Recovery Area (LAMBRA), Targeted Tax Area (TTA), or Manufacturing Enhancement Area (MEA) tax benefits? ☐ Yes ☒ No
- J** Is this organization a qualified pension, profit-sharing, or stock bonus plan as described in IRC Section 401(a)? ☐ Yes ☒ No
- K** Unrelated Business Activity (UBA) Code **531390**
- L** Is this a Hospital? ☐ Yes ☒ No
If "Yes," attach federal Schedule H (Form 990)

Taxable Corporation	1 Unrelated business taxable income from Side 2, Part II, line 30	1	-24,204.00
	2 Mult. In 1 by the avg. apport. pctg .0044 % from the Sch. R, Apport. Formula Wksht, Part A, In 2 or Part B, In 5. See instr.	2	-106.00
	3 Enter the lesser amt from In 1 or In 2. If the unrelated bus. activity is wholly in CA and Sch. R was not compltd, enter the amt from In 1	3	-106.00
Taxable Trust	4 Unrelated business taxable income from Side 2, Part II, line 30	4	00
Tax Computation	5 Unrelated business taxable income from line 3 or line 4	5	-106.00
	6 Pierce's disease, EZ, LARZ, LAMBRA, or TTA NOL carryover deduction	6	00
	7 Net Operating Loss deduction. See General Information N	7	00
	8 Add line 6 and line 7	8	00
	9 Net unrelated business taxable income. Subtract line 8 from line 5	9	-106.00
	10 Tax 8.84 % x line 9. See General Information J	10	00
	11 a New employment credit, amount generated. a) _____ 11 b) Amount claimed _____	11b	00
	c Tax credits from Schedule B. See instructions	11c	00
d Total Credits. Add line 11b and 11c	11d	00	
Total Tax	12 Balance. Subtract line 11d from line 10. If line 11d is greater than line 10, enter -0-	12	00
	13 Alternative minimum tax. See General Information O	13	00
	14 Total tax. Add line 12 and line 13	14	0.00
Payments	15 Overpayment from a prior year allowed as a credit	15	00
	16 2015 estimated tax payments. See instructions	16	00
	17 Withholding (Form 592-B and/or 593.) See instructions	17	00
	18 Amount paid with extension (form FTB 3539)	18	00
	19 Total payments and credits. Add line 15 through line 18	19	00
Use Tax/ Tax Due/ Overpayment	20 Use tax. See instructions	20	00
	21 Payments balance. If line 19 is more than line 20, subtract line 20 from line 19	21	00
	22 Use tax balance. If line 20 is more than line 19, subtract line 19 from line 20	22	00
	23 Tax due. Subtract line 21 from line 14. Pay entire amount with return. See instructions	23	00
	24 Overpayment. Subtract line 14 from line 21. See instructions	24	00
	25 Enter amount of line 24 to be applied to 2016 estimated tax	25	00

Refund or Amount Due	26 Refund. If line 25 is less than line 24, then subtract line 25 from line 24	26	00
	a Fill in the account information to have the refund directly deposited. Routing number	26a	
	b Type: Checking <input type="checkbox"/> Savings <input type="checkbox"/> c Account Number	26c	
	27 Penalties and interest. See General Information M	27	00
	28 <input type="checkbox"/> Check if estimate penalty computed using Exception B or C and attach form FTB 5806.		
	29 Total amount due. Add line 22, line 23, line 25, and line 27, then subtract line 24	29	00

Unrelated Business Taxable Income**Part I Unrelated Trade or Business Income**

1 a Gross receipts or gross sales	b Less returns and allowances	c Balance	1c	00
2 Cost of goods sold and/or operations (Schedule A, line 7)			2	00
3 Gross profit. Subtract line 2 from line 1c			3	00
4 a Capital gain net income. See Specific Line Instructions - Trusts attach Schedule D (541)			4a	00
b Net gain (loss) from Part II, Schedule D-1			4b	00
c Capital loss deduction for trusts			4c	00
5 Income (or loss) from partnerships, limited liability companies, or S corporations. See specific line instructions. Attach Schedule K-1 (565, 568, or 100S) or similar schedule	SEE STATEMENT 1		5	-24,204.00
6 Rental income (Schedule C)			6	00
7 Unrelated debt-financed income (Schedule D)			7	00
8 Investment income of an R&TC Section 23701g, 23701i, or 23701n organization (Schedule E)			8	00
9 Interest, Annuities, Royalties and Rents from controlled organizations (Schedule F)			9	00
10 Exploited exempt activity income (Schedule G)			10	00
11 Advertising income (Schedule H, Part III, Column A)			11	00
12 Other income. Attach schedule			12	00
13 Total unrelated trade or business income. Add line 3 through line 12			13	-24,204.00

Part II Deductions Not Taken Elsewhere (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees from Schedule I	14	00
15 Salaries and wages	15	00
16 Repairs	16	00
17 Bad debts	17	00
18 Interest	18	00
19 Taxes	19	00
20 Contributions	20	00
21 a Depreciation (Corporations and Associations - Schedule J) (Trusts - form FTB 3885F)	21a	00
b Less: depreciation claimed on Schedule A	21b	00
22 Depletion	22	00
23 a Contributions to deferred compensation plans	23a	00
b Employee benefit programs	23b	00
24 Other deductions	24	00
25 Total deductions. Add line 14 through line 24	25	00
26 Unrelated business taxable income before allowable excess advertising costs. Subtract line 25 from line 13	26	-24,204.00
27 Excess advertising costs (Schedule H, Part III, Column B)	27	00
28 Unrelated business taxable income before specific deduction. Subtract line 27 from line 26	28	-24,204.00
29 Specific deduction	29	1,000.00
30 Unrelated business taxable income. Subtract line 29 from line 28. If line 28 is a loss, enter line 28	30	-24,204.00

Sign Here	To learn about your privacy rights, how we may use your information, and the consequences for not providing the requested information, go to ftb.ca.gov and search for privacy notice. To request this notice by mail, call 800.852.5711.			
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Paid Preparer's Use Only	Signature of officer	Title PRESIDENT & CEO	Date	• Telephone
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	• PTIN P00757336
	Firm's name (or yours, if self-employed)	RSM US LLP		• FEIN 42-0714325
	and address	751 ARBOR WAY, SUITE 200 BLUE BELL, PA 19422		• Telephone 215.641.8600
	May the FTB discuss this return with the preparer shown above? See instructions			• <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Schedule A Cost of Goods Sold and/or Operations.

Method of inventory valuation (specify)

N/A

1	Inventory at beginning of year	1	00
2	Purchases	2	00
3	Cost of labor	3	00
4	a Additional IRC Section 263A costs. Attach schedule	4a	00
	b Other costs. Attach schedule	4b	00
5	Total. Add line 1 through line 4b	5	00
6	Inventory at end of year	6	00
7	Cost of goods sold and/or operations. Subtract line 6 from line 5. Enter here and on Side 2, Part I, line 2	7	00

Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to this organization? ☐ Yes ☒ No

Schedule B Tax Credits. Do not claim the New Employment Credit on Schedule B.

1	Enter credit name	code	1	00
2	Enter credit name	code	2	00
3	Enter credit name	code	3	00
4	Total. Add line 1 through line 3. If claiming more than 3 credits, enter the total of all claimed credits, except New Employment Credit, on line 4. Enter here and on Side 1, line 11c	4	00	

Schedule K Add-On Taxes or Recapture of Tax.

1	Interest computation under the look-back method for completed long-term contracts. Attach form FTB 3834	1	00
2	Interest on tax attributable to installment: a Sales of certain timeshares or residential lots	2a	00
	b Method for non-dealer installment obligations	2b	00
3	IRC Section 197(f)(9)(B)(ii) election to recognize gain on the disposition of intangibles	3	00
4	Credit recapture. Credit name	4	00
5	Total. Combine the amounts on line 1 through line 4	5	00

Schedule R Apportionment Formula Worksheet. Use only for unrelated trade or business amounts.**Part A. Standard Method - Single-Sales Factor Formula.** Complete this part only if the corporation uses the single-sales factor formula.

	(a) Total within and outside California	(b) Total within California	(c) Percent within California [(b) ÷ (a)] x 100
1 Total Sales	•	•	
2 Apportionment percentage. Divide total sales column (b) by total sales column (a) and multiply the result by 100. Enter the result here and on Form 109, Side 1, line 2.			•

Part B. Three Factor Formula. Complete this part only if the corporation uses the three-factor formula.

	(a) Total within and outside California	(b) Total within California	(c) Percent within California [(b) ÷ (a)] x 100
1 Property factor:	•	•	•
2 Payroll factor: Wages and other compensation of employees	•	•	•
3 Sales factor: Gross sales and/or receipts less returns and allowances	•	•	•
4 Total percentage: Add the percentages in column (c)			
5 Average apportionment percentage: Divide the factor on line 4 by 3 and enter the result here and on Form 109, Side 1, line 2. See instructions for exceptions			.0044%

Schedule C Rental Income from Real Property and Personal Property Leased with Real Property

For rental income from debt-financed property, use Schedule D, R&TC Section 23701g, Section 23701i, and Section 23701n organizations. See instructions for exceptions.

1 Description of property	2 Rent received or accrued	3 Percentage of rent attributable to personal property
		%
		%
		%
4 Complete if any item in column 3 is more than 50%, or for any item if the rent is determined on the basis of profit or income	5 Complete if any item in column 3 is more than 10%, but not more than 50%	
(a) Deductions directly connected	(b) Income includible, column 2 less column 4(a)	(a) Gross income reportable, column 2 x column 3
		(b) Deductions directly connected with personal property
		(c) Net income includible, column 5(a) less column 5(b)

Add columns 4(b) and column 5(c). Enter here and on Side 2, Part I, line 6

Schedule D Unrelated Debt-Financed Income

1 Description of debt-financed property			2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
				(a) Straight-line depreciation	(b) Other deductions
4 Amount of average acquisition indebtedness on or allocable to debt-financed property	5 Average adjusted basis of or allocable to debt-financed property	6 Debt basis percentage, column 4 ÷ column 5	7 Gross income reportable, column 2 x column 6	8 Allocable deductions, total of columns 3(a) and 3(b) x column 6	9 Net income (or loss) includible, column 7 less column 8
		%			
		%			
		%			
Total. Enter here and on Side 2, Part I, line 7					

Schedule E Investment Income of an R&TC Section 23701g, Section 23701i, or Section 23701n Organization

1 Description	2 Amount	3 Deductions directly connected	4 Net investment income, column 2 less column 3	5 Set-asides	6 Balance of investment income, column 4 less column 5
Total. Enter here and on Side 2, Part I, line 8					
Enter gross income from members (dues, fees, charges, or similar amounts)					

Schedule F Interest, Annuities, Royalties and Rents from Controlled Organizations

			Exempt Controlled Organizations		
1 Name of controlled organizations	2 Employer Identification Number	3 Net unrelated income (loss)	4 Total of specified payments made	5 Part of column (4) that is included in the controlling organization's gross income	6 Deductions directly connected with income in column (5)
1		0.	0.	0.	0.
2					
3					
Nonexempt Controlled Organizations					
7 Taxable Income	8 Net unrelated income (loss)	9 Total of specified payments made	10 Part of column (9) that is included in the controlling organization's gross income	11 Deductions directly connected with income in column (10)	
1					
2					
3					
4 Add columns 5 and 10					
5 Add columns 6 and 11					
6 Subtract line 5 from line 4. Enter here and on Side 2, Part 1, line 9					

Schedule G Exploited Exempt Activity Income, other than Advertising Income

1 Description of exploited activity (attach schedule if more than one unrelated activity is exploiting the same exempt activity)	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income from unrelated trade or business, column 2 less column 3	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expense, column 6 less column 5 but not more than column 4	8 Net income includible, column 4 less column 7 but not less than zero
Total. Enter here and on Side 2, Part I, line 10							

Schedule H Advertising Income and Excess Advertising Costs**Part I Income from Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising income or excess advertising costs. If column 2 is greater than column 3, complete columns 5, 6, and 7. If column 3 is greater than column 2, enter the excess in Part III, column B(b). Do not complete columns 5, 6, and 7.	5 Circulation income	6 Readership costs	7 If column 5 is greater than column 6, enter the income shown in column 4, in Part III, column A(b). If column 6 is greater than column 5, subtract the sum of column 6 and column 3 from the sum of column 5 and column 2. Enter amount in Part III, column A(b). If the amount is less than zero, enter -0-.
Totals						

Part II Income from Periodicals Reported on a Separate Basis

Part III Column A - Net Advertising Income

(a) Enter "consolidated periodical" and/or names of non-consolidated periodicals	(b) Enter total amount from Part I, column 4 or 7, and amount listed in Part II, column 4 or 7
Enter total here and on Side 2, Part I, line 11	

Part III Column B - Excess Advertising Costs

(a) Enter "consolidated periodical" and/or names of non-consolidated periodicals	(b) Enter total amount from Part I, column 4, and amounts listed in Part II, column 4
Enter total here and on Side 2, Part II, line 27	

Schedule I Compensation of Officers, Directors, and Trustees

1 Name of Officer	2 SSN or ITIN	3 Title	4 Percent of time devoted to business	5 Compensation attributable to unrelated business	6 Expense account allowances
			%		
			%		
			%		
			%		
			%		
Total. Enter here and on Side 2, Part II, line 14					

Schedule J Depreciation (Corporations and Associations only. Trusts use form FTB 3885F.)

1 Group and guideline class or description of property	2 Date acquired (mm/dd/yyyy)	3 Cost or other basis	4 Depreciation allowed or allowable in prior years	5 Method of computing depreciation	6 Life or rate	7 Depreciation for this year
1 Total additional first-year depreciation (do not include in items below)						
2 Other depreciation:						
Buildings						
Furniture and fixtures						
Transportation equipment						
Machinery and other equipment						
Other (specify)						
3 Other depreciation						
4 Total						
5 Amount of depreciation claimed elsewhere on return						
6 Balance. Subtract line 5 from line 4. Enter here and on Side 2, Part II, line 21a						

FORM 109	INCOME OR (LOSS) FROM PARTNERSHIPS, LIMITED LIABILITY COMPANIES OR S CORPORATIONS	STATEMENT 1
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DESCRIPTION	AMOUNT
UNRELATED BUSINESS INCOME/LOSS FROM VARIOUS PARTNERSHIP INVESTMENTS	-24,204.
TOTAL TO FORM 109, PAGE 2, LINE 5	-24,204.

2015

Net Operating Loss (NOL) Computation and NOL and Disaster Loss Limitations - Corporations

3805Q

Attach to Form 100, Form 100W, Form 100S, or Form 109.

Corporation name

PHILADELPHIA
JEWISH FEDERATION OF GREATER

California corporation number

9607931

During the taxable year the corporation incurred the NOL, the corporation was a(n): ☒ C Corporation ☐ S Corporation☒ Exempt Organization ☐ Limited liability company (electing to be taxed as a corporation)

FEIN

23-1500085

If the corporation previously filed California tax returns under another corporate name, enter the corporation name and California corporation number:

If the corporation is included in a combined report of a unitary group, see instructions, General Information C, Combined Reporting.

Part I Current year NOL. If the corporation does not have a current year NOL, go to Part II.

1 Net loss from Form 100, line 18; Form 100W, line 18; Form 100S, line 15; or Form 109, line 2.

Enter as a positive number 1 106.00

2 2015 disaster loss included in line 1. Enter as a positive number 2 00

3 Subtract line 2 from line 1. If zero or less, enter -0- and see instructions 3 106.00

4 a Enter the amount of the loss incurred by a new business included in line 3 4a 00

b Enter the amount of the loss incurred by an eligible small business included in line 3 4b 00

c Add line 4a and line 4b 4c 00

5 General NOL. Subtract line 4c from line 3 5 106.00

6 Current Year NOL. Add line 2, line 4c, and line 5. See instructions 6 106.00

If the corporation is using the current year NOL to carryback to offset net income for taxable years 2013 and/or 2014, complete

Part III, NOL carryback, on Side 2 before completing Part I, lines 7-9 below.

7 2015 NOL carryback used to offset 2013 net income. Enter the amount from Part III, line 3, column (e) 7 00

8 2015 NOL carryback used to offset 2014 net income. Enter the amount from Part III, line 3, column (g) 8 00

9 2015 NOL carryover to 2016. Add line 7 and line 8, then subtract the result from line 6. See instructions. 9 106.00

Election to waive carryback

☒ Check the box if the corporation elects to relinquish the entire carryback period with respect to 2015 NOL under IRC Section 172(b)(3). By making the election, the corporation is electing to carry an NOL forward instead of carrying it back in the previous two years. Once the election is made, it's **irrevocable**. See instructions. Continue with Part II, NOL carryover and disaster loss carryover limitations. **Do not** complete Part III, NOL carryback.

Part II NOL carryover and disaster loss carryover limitations. See instructions.

1 Net income - Enter the amount from Form 100, line 18; Form 100W, line 18; Form 100S, line 15 less line 16; or Form 109, line 2; (but not less than -0-).

(g) Available balance

0.

Prior Year NOLs

(a) Year of loss	(b) Code - See instructions	(c) Type of NOL - See below *	(d) Initial loss - See instructions	(e) Carryover from 2014	(f) Amount used in 2015	(g) Available balance	(h) Carryover to 2016 col. (e) - col. (f)
2012		GEN	19,718.	18,797.	0.	0.	18,797.

Current Year NOLs

(a) Year of loss	(b) Code - See instructions	(c) Type of NOL - See below *	(d) Initial loss - See instructions	(e) Carryover from 2014	(f) Amount used in 2015	(g) Available balance	(h) Carryover to 2016 col. (e) - col. (f)
3 2015		DIS					col. (d) - col. (f) See instructions.
4 2015		GEN	106.				106.
2015							
2015							
2015							

Type of NOL: General (GEN), New Business (NB), Eligible Small Business (ESB), or Disaster (DIS).

Part III NOL carryback

1	2013 Net income - Enter the amount from 2013 Form 100, line 23; Form 100W, line 23; Form 100S line 21; or taxable income from Form 109, line 9; (but not less than -0-)	0 .
2	2014 Net income - Enter the amount from 2014 Form 100, line 22; Form 100W, line 22; Form 100S, line 20; or taxable income from Form 109, line 9; (but not less than -0-)	0 .

(a) Year of Loss	(b) Code - See Instruc- tions	(c) Type of NOL - See below*	(d) Initial loss - See Instructions	2013		2014		(i) Carryover to 2016 col. (d) - (col. (e) + col. (g))
				(e) Carryback used - See instructions	(f) After carryback col. (d) minus col. (e)	(g) Carryback used - See instructions	(h) After carryback col. (f) minus col. (g)	
3 2015		GEN	1 0 6	0	1 0 6	0	1 0 6	1 0 6
2015								
2015								
2015								
2015								

* **Type of NOL:** General (GEN), New Business (NB), Eligible Small Business (ESB), or NOL attributable to a qualified disaster loss (DIS).

Part IV 2015 NOL deduction

1	Total the amounts in Part II, line 2, column (f)	1	00
2	Enter the total amount from line 1 that represents disaster loss carryover deduction here and on Form 100, line 21; Form 100W, line 21; or Form 100S, line 19. Form 109 filers enter -0-	2	00
3	Subtract line 2 from line 1. Enter the result here and on Form 100, line 19; Form 100W, line 19; Form 100S, line 17; or Form 109, line 7	3	0 . 00