

Form **990**

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

# 2011

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**Open to Public Inspection**

**A** For the **2011** calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization JEWISH FEDERATION OF GREATER ATLANTA, INC. Doing Business As		<b>D</b> Employer identification number 58-1021791
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1440 SPRING STREET, NW		<b>E</b> Telephone number 404-873-1661
	City or town, state or country, and ZIP + 4 ATLANTA, GA 30309-2837		<b>G</b> Gross receipts \$ 61,428,383.
	<b>F</b> Name and address of principal officer: SHEILA KATZ COHEN SAME AS C ABOVE		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> 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			
<b>J</b> Website: ▶ JEWISHATLANTA.ORG			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: 1967
<b>M</b> State of legal domicile: GA			

<b>Part I Summary</b>		Prior Year	Current Year
<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: THE JEWISH FEDERATION OF GREATER ATLANTA TRANSFORMS JEWISH VALUES INTO TANGIBLE DEEDS. WE CARE FOR		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	136
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	135
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	60
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	900
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	30,967,116.	27,992,705.
	<b>9</b> Program service revenue (Part VIII, line 2g)	0.	0.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,765,765.	2,095,397.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	537,664.	703,542.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,270,545.	30,791,644.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	22,943,619.	21,703,118.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,080,713.	3,562,267.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	9,174.	12,969.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,872,179.		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,664,648.	2,656,325.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	29,698,154.	27,934,679.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	3,572,391.	2,856,965.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year 109,343,325.	End of Year 112,521,329.
	<b>21</b> Total liabilities (Part X, line 26)	51,711,733.	55,378,109.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	57,631,592.	57,143,220.

## 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.

<b>Sign Here</b>	▶ Signature of officer	Date			
	▶ SHEILA KATZ COHEN, CFO Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name CARLYE W. BUCHANAN	Preparer's signature CARLYE W. BUCHANAN	Date 05/17/13	Check if self-employed <input type="checkbox"/>	PTIN P00292964
	Firm's name ▶ WINDHAM BRANNON P.C.	Firm's EIN ▶ 58-1763439	Firm's address ▶ 3630 PEACHTREE ROAD, N.E., STE. 600 ATLANTA, GA 30326	Phone no. 404-898-2000	

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: THE JEWISH FEDERATION OF GREATER ATLANTA TRANSFORMS JEWISH VALUES INTO TANGIBLE DEEDS. WE CARE FOR THE VULNERABLE, RESCUE THE IMPERILED, AND STRENGTHEN THE JEWISH COMMUNITY IN ATLANTA, 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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

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 and section 4947(a)(1) trusts 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 \$ 17,396,685. including grants of \$ 17,075,129. ) (Revenue \$ ) JEWISH CONTINUITY: UNDERSTANDING JUDAISM, ITS VALUES AND TRADITIONS, IS SOMETHING THAT MUST BE TAUGHT IN ORDER TO MAINTAIN JEWISH LIFE IN ATLANTA AND FOR GENERATIONS TO COME. THE ATLANTA JEWISH COMMUNITY IS INCREASINGLY DIVERSE, AND ENSURING THAT EVERYONE FEELS WELCOME IN OUR COMMUNITY HAS NEVER BEEN SO IMPORTANT TO THE FUTURE OF JEWISH ATLANTA. THROUGH THE JEWISH CONTINUITY PROGRAMS OF THE JEWISH FEDERATION OF GREATER ATLANTA, JEWS OF EVERY AGE THROUGHOUT THE COMMUNITY CONNECT WITH THEIR JEWISH HERITAGE AND ENGAGE WITH OTHER COMMUNITY MEMBERS. FEDERATION SUPPORTS FORMAL AND INFORMAL JEWISH EDUCATION THROUGH THE FUNDING OF 7 PAROCHIAL SCHOOLS IN ATLANTA WHICH PROVIDE A JEWISH EDUCATION FROM PRIMARY THROUGH HIGH SCHOOL, ISRAEL AND CAMP SCHOLARSHIPS, TEEN CLUBS AND

4b (Code: ) (Expenses \$ 3,439,753. including grants of \$ 3,439,753. ) (Revenue \$ ) CARING FOR THOSE IN NEED: JEWISH FEDERATION OF GREATER ATLANTA SUPPORTS PROGRAMS THAT PROVIDE ASSISTANCE AND HUMANITARIAN SERVICES TO VULNERABLE POPULATIONS. SERVICES INCLUDE FOOD, SHELTER ASSISTANCE, MEDICAL SERVICES, TRANSPORTATION, AND JOB AND EMOTIONAL COUNSELING. IN ASSOCIATION WITH OUR MULTIPLE AFFILIATE AGENCIES WE SUPPORT PROGRAMS THAT ALLOW ELDERLY OR DISADVANTAGED COMMUNITY MEMBERS TO LIVE IN A SUPPORTIVE JEWISH ENVIRONMENT. FEDERATION ALSO SUPPORTS THE ELDERLY THROUGH PROGRAMS LIKE NATURALLY OCCURRING RETIREMENT COMMUNITIES (NORC) AND CAREGIVER CARE. THESE PROGRAMS ALLOW SENIORS TO AGE IN THEIR HOMES WHILE RECEIVING SERVICES TO HELP THEM WITH SAFETY, TRANSPORTATION, MEDICAL, AND SOCIALIZATION CONCERNS.

4c (Code: ) (Expenses \$ 2,764,997. including grants of \$ 74,380. ) (Revenue \$ ) LEADERSHIP DEVELOPMENT AND PHILANTHROPIC EDUCATION: JEWISH FEDERATION OF GREATER ATLANTA PROVIDES ITS VOLUNTEER LEADERS AND PROFESSIONAL STAFF, AS WELL AS ORGANIZATIONAL LEADERS THROUGHOUT THE COMMUNITY WITH THE OPPORTUNITY TO GROW IN LEADERSHIP POSITIONS AND IN PROFESSIONAL SKILLS THROUGH INVOLVEMENT WITH NATIONAL ORGANIZATIONS, LOCAL NETWORKING EVENTS, TRAINING PROGRAMS AND CONTINUING EDUCATION PROGRAMS. OUR VOLUNTEERS ARE PROVIDED WITH SKILLS TRAINING AS WELL AS THE OPPORTUNITY TO ENGAGE WITH OTHER VOLUNTEERS AND COMMUNITY MEMBERS. OUR PLANNED GIVING & ENDOWMENT DIVISION HOLDS AN ANNUAL SYMPOSIUM FOR FINANCIAL ADVISORS, CPAS, AND LAWYERS AS WELL AS GIVING FAMILIES A CHANCE TO WORK TOGETHER TO FULFILL THEIR PHILANTHROPIC GOALS. THE FEDERATION WORKS TO BUILD BRIDGES BETWEEN COMMUNITY MEMBERS AND

4d Other program services (Describe in Schedule O.) (Expenses \$ 1,142,852. including grants of \$ 1,113,857. ) (Revenue \$ 640,923.)

4e Total program service expenses 24,744,287.

**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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "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; 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, XII, and XIII</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, XII, and XIII 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 assistance to any organization or entity located outside the United States? <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 assistance to individuals located outside the United States? <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
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
b	<i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i> .....		

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> 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	
<b>24a</b> 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 25</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> 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>b</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
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</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
<b>c</b> 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	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> 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
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> 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
<b>33</b> 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
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> 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
<b>36 Section 501(c)(3) organizations.</b> 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
<b>37</b> 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
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	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)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	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?		X
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		X
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		X
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13b</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		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

**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 to any question in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year ..... 136		
	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>b</b>	Enter the number of voting members included in line 1a, above, who are independent ..... 135		
<b>2</b>	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? .....	X	
<b>3</b>	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? .....		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....	X	
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? .....		X
<b>6</b>	Did the organization have members or stockholders? .....	X	
<b>7a</b>	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? .....	X	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? .....	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body? .....	X	
<b>9</b>	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 .....		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? .....		X
<b>b</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? .....		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .....	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 .....	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done .....	X	
<b>13</b>	Did the organization have a written whistleblower policy? .....	X	
<b>14</b>	Did the organization have a written document retention and destruction policy? .....	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official .....	X	
<b>b</b>	Other officers or key employees of the organization .....	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .....		X
<b>b</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? .....		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed  GA
- 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
- 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, physical address, and telephone number of the person who possesses the books and records of the organization:  \_\_\_\_\_  
 SHEILA KATZ COHEN - 404-873-1661  
 1440 SPRING STREET, NW, ATLANTA, GA 30309-2837

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

Check if Schedule O contains a response to any question 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 (describe hours for related organizations in Schedule O)	(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) MARSHALL ABES TRUSTEE	1.00	X					0.	0.	0.	
(2) DAVID M. AMAR TRUSTEE	1.00	X					0.	0.	0.	
(3) ELLEN ARNOVITZ TRUSTEE	1.00	X					0.	0.	0.	
(4) BETH W. AROGETI TRUSTEE	1.00	X					0.	0.	0.	
(5) BOB AROTSKY TRUSTEE	1.00	X					0.	0.	0.	
(6) SPRING ASHER TRUSTEE	1.00	X					0.	0.	0.	
(7) MARCY A. BASS TRUSTEE	1.00	X					0.	0.	0.	
(8) RABBI PETER BERG TRUSTEE	1.00	X					0.	0.	0.	
(9) DAVID F. BIRNBREY TRUSTEE	1.00	X					0.	0.	0.	
(10) HENRY BIRNBREY TRUSTEE	1.00	X					0.	0.	0.	
(11) JOANNE BIRNBREY TRUSTEE	1.00	X					0.	0.	0.	
(12) ARTHUR M. BLANK TRUSTEE	1.00	X					0.	0.	0.	
(13) THEODORE I. BLUM TRUSTEE	1.00	X					0.	0.	0.	
(14) KAREN B. BRAGMAN TRUSTEE	1.00	X					0.	0.	0.	
(15) S. PERRY BRICKMAN TRUSTEE	1.00	X					0.	0.	0.	
(16) MATT M. BRONFMAN TRUSTEE	1.00	X					0.	0.	0.	
(17) LAURA CATLIN TRUSTEE	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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 CHIMBEROFF TRUSTEE	1.00	X						0.	0.	0.
(19) GREGG COHEN TRUSTEE	1.00	X						0.	0.	0.
(20) MICHAEL J. COLES TRUSTEE	1.00	X						0.	0.	0.
(21) LARRY E. COOPER TRUSTEE	1.00	X						0.	0.	0.
(22) ANN L. DAVIS TRUSTEE	1.00	X						0.	0.	0.
(23) JAY M. DAVIS TRUSTEE	1.00	X						0.	0.	0.
(24) ANDREW DEUTSCH TRUSTEE	1.00	X						0.	0.	0.
(25) JULIE DUCOFFE-BLASE TRUSTEE	1.00	X						0.	0.	0.
(26) ILENE ENGEL TRUSTEE	1.00	X						0.	0.	0.
<b>1b Sub-total</b> .....								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								852,390.	0.	174,657.
<b>d Total (add lines 1b and 1c)</b> .....								852,390.	0.	174,657.

**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 **6**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		X
<b>4</b> 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	
<b>5</b> 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
LENZ, 119 EAST COURT SQUARE, SUITE 101, DECATUR, GA 30030	MARKETING	212,275.
IDLEWOOD PROPERTIES, INC., 5025 M WINTERS CHAPEL ROAD, ATLANTA, GA 30036	MANAGEMENT SERVICES	155,251.
PARTNERTEL, INC., 5490 MCGINNIS VILLAGE PLACE, SUITE 100, ALPHARETTA, GA 30005	INFORMATION TECHNOLOGY	116,845.

**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 **3**



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

(A) Name and title	(B) Average hours per week	(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) INA ENOCH TRUSTEE	1.00	X						0.	0.	0.
(28) BARRY ETRA TRUSTEE	1.00	X						0.	0.	0.
(29) ELISA EZOR TRUSTEE	1.00	X						0.	0.	0.
(30) HOWARD L. FEINSAND TRUSTEE	1.00	X						0.	0.	0.
(31) DIANE FISHER TRUSTEE	1.00	X						0.	0.	0.
(32) MARTIN FLEISCHMANN TRUSTEE	1.00	X						0.	0.	0.
(33) ISAAC FRANK TRUSTEE	1.00	X						0.	0.	0.
(34) JACK I. FREEDMAN TRUSTEE	1.00	X						0.	0.	0.
(35) PHYLLIS B. FREEDMAN TRUSTEE	1.00	X						0.	0.	0.
(36) RANDY GOLD TRUSTEE	1.00	X						0.	0.	0.
(37) MICHAEL D. GOLDSTEIN TRUSTEE	1.00	X						0.	0.	0.
(38) SAMMY J. GRANT TRUSTEE	1.00	X						0.	0.	0.
(39) KEITH GREENWALD TRUSTEE	1.00	X						0.	0.	0.
(40) LAUREN GRIEN TRUSTEE	1.00	X						0.	0.	0.
(41) JACK N. HALPERN TRUSTEE	1.00	X						0.	0.	0.
(42) LISA C. HAYNOR PLANNED GIVING & ENDOWMENT FUND, VIC	4.00	X		X				0.	0.	0.
(43) GAIL HEYMAN TRUSTEE	1.00	X						0.	0.	0.
(44) DAVID A. HIRSCH TRUSTEE	1.00	X						0.	0.	0.
(45) GERALD D. HOROWITZ TRUSTEE	1.00	X						0.	0.	0.
(46) DAVID HORWITZ TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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

(A) Name and title	(B) Average hours per week	(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) BETTY ANN JACOBSON TRUSTEE	1.00	X						0.	0.	0.
(48) WALTER E. JOSPIN TRUSTEE	1.00	X						0.	0.	0.
(49) LORI KAGAN-SCHWARZ TRUSTEE	1.00	X						0.	0.	0.
(50) MARCY KALNITZ TRUSTEE	1.00	X						0.	0.	0.
(51) FRED N. KATZ TRUSTEE	1.00	X						0.	0.	0.
(52) HOWARD KATZ TRUSTEE	1.00	X						0.	0.	0.
(53) ANDY KAUSS TRUSTEE	1.00	X						0.	0.	0.
(54) RABBI PAUL D. KERBEL TRUSTEE	1.00	X						0.	0.	0.
(55) CANDACE K. KERKER TRUSTEE	1.00	X						0.	0.	0.
(56) MARTIN KOGON TRUSTEE	1.00	X						0.	0.	0.
(57) MICHAEL KOGON TRUSTEE	1.00	X						0.	0.	0.
(58) ROSS A. KOGON TRUSTEE	1.00	X						0.	0.	0.
(59) MITCHELL KOPELMAN TRUSTEE	1.00	X						0.	0.	0.
(60) DAVID L. KUNIANSKY TRUSTEE	1.00	X						0.	0.	0.
(61) TERI LEVINE TRUSTEE	1.00	X						0.	0.	0.
(62) ALAN D. LEVOW TRUSTEE	1.00	X						0.	0.	0.
(63) GREG LEWIS TRUSTEE	1.00	X						0.	0.	0.
(64) MARK J. LICHTENSTEIN TRUSTEE	1.00	X						0.	0.	0.
(65) BERNARD MARCUS TRUSTEE	1.00	X						0.	0.	0.
(66) WILLIAM M. MEDOF TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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

(A) Name and title	(B) Average hours per week	(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) MICHAEL MERLIN TRUSTEE	1.00	X						0.	0.	0.
(68) DAVID N. MINKIN TRUSTEE	1.00	X						0.	0.	0.
(69) MICHAEL PLASKER TRUSTEE	1.00	X						0.	0.	0.
(70) KELLE L. ROSENBERG TRUSTEE	1.00	X						0.	0.	0.
(71) MARK D. ROSENBERG CAMPAIGN VICE-CHAIR	4.00	X		X				0.	0.	0.
(72) ROBERT T. ROTHBERG TRUSTEE	1.00	X						0.	0.	0.
(73) ARNOLD B. RUBENSTEIN TRUSTEE	1.00	X						0.	0.	0.
(74) CAROL RUBIN TRUSTEE	1.00	X						0.	0.	0.
(75) RABBI NEIL SANDLER TRUSTEE	1.00	X						0.	0.	0.
(76) MARK SATISKY TRUSTEE	1.00	X						0.	0.	0.
(77) JANE SCHIFF TRUSTEE	1.00	X						0.	0.	0.
(78) ANDRE SCHNABL TRUSTEE	1.00	X						0.	0.	0.
(79) TIM S. SCHRAGER TRUSTEE	1.00	X						0.	0.	0.
(80) ARTHUR J. SCHWARTZ TRUSTEE	1.00	X						0.	0.	0.
(81) JOYCE SCHWOB TRUSTEE	1.00	X						0.	0.	0.
(82) CATHY SELIG CAMPAIGN CHAIR	4.00	X		X				0.	0.	0.
(83) LINDA SELIG TRUSTEE	1.00	X						0.	0.	0.
(84) S. STEPHEN SELIG III TRUSTEE	1.00	X						0.	0.	0.
(85) MINDY SELIG-SHOULBERG TRUSTEE	1.00	X						0.	0.	0.
(86) CAROL SHERWINTER TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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

(A) Name and title	(B) Average hours per week	(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) JOYCE SHLESINGER TRUSTEE	1.00	X						0.	0.	0.
(88) LEWIS S. SHUBIN TRUSTEE	1.00	X						0.	0.	0.
(89) TOBYANNE D. SIDMAN TRUSTEE	1.00	X						0.	0.	0.
(90) JERRY SIEGEL TRUSTEE	1.00	X						0.	0.	0.
(91) LENNY SILVERSTEIN TRUSTEE	1.00	X						0.	0.	0.
(92) JODIE SOBEL TRUSTEE	1.00	X						0.	0.	0.
(93) RABBI ADAM STARR TRUSTEE	1.00	X						0.	0.	0.
(94) BETTY SUNSHINE ASSISTANT SECRETARY	4.00	X		X				0.	0.	0.
(95) STAN SUNSHINE TRUSTEE	1.00	X						0.	0.	0.
(96) SAMUEL L. TUCK TRUSTEE	1.00	X						0.	0.	0.
(97) GARRETT VAN DE GRIFT TRUSTEE	1.00	X						0.	0.	0.
(98) JERRY G. WEINER TRUSTEE	1.00	X						0.	0.	0.
(99) BRUCE H. WEINSTEIN TRUSTEE	1.00	X						0.	0.	0.
(100) ERIC WEISS TRUSTEE	1.00	X						0.	0.	0.
(101) NANCY L. WEISSMANN TRUSTEE	1.00	X						0.	0.	0.
(102) PETER WEITZNER TRUSTEE	1.00	X						0.	0.	0.
(103) MICHAEL WIEN TRUSTEE	1.00	X						0.	0.	0.
(104) DAVID WITT TRUSTEE	1.00	X						0.	0.	0.
(105) ASHLEY WOODMAN TRUSTEE	1.00	X						0.	0.	0.
(106) HARRIET ZIMMERMAN TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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

(A) Name and title	(B) Average hours per week	(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) ELIOT M. ARNOVITZ TRUSTEE & PRESIDENT	17.00	X		X				0.	0.	0.
(108) ROBERT J. AROGETI CHAIR	4.00	X		X				0.	0.	0.
(109) GERALD R. BENJAMIN FIRST VICE CHAIR	4.00	X		X				0.	0.	0.
(110) SETH A. COHEN TRUSTEE	1.00	X						0.	0.	0.
(111) CAROL Z. COOPER TRUSTEE	1.00	X						0.	0.	0.
(112) IRIS Z. FEINBERG VICE CHAIR	4.00	X		X				0.	0.	0.
(113) VIKI FREEMAN VICE CHAIR	4.00	X		X				0.	0.	0.
(114) LYNNE M. HALPERN VICE CHAIR	4.00	X		X				0.	0.	0.
(115) HARRY J. HEIMAN VICE CHAIR	4.00	X		X				0.	0.	0.
(116) RONALD S. KIRSCHNER TREASURER	4.00	X		X				0.	0.	0.
(117) EYDIE KOONIN VICE CHAIR	4.00	X		X				0.	0.	0.
(118) LOIS L. KUNIANSKY VICE CHAIR	4.00	X		X				0.	0.	0.
(119) MARC LEWYN PLANNED GIVING & ENDOWMENT CHAIR	4.00	X		X				0.	0.	0.
(120) FRED B. WACHTER ASSISTANT SECRETARY	4.00	X		X				0.	0.	0.
(121) LYNN SAPERSTEIN TRUSTEE	1.00	X						0.	0.	0.
(122) ELANA SATISKY TRUSTEE	1.00	X						0.	0.	0.
(123) SUE ROTHSTEIN TRUSTEE	1.00	X						0.	0.	0.
(124) BELINDA MORRIS TRUSTEE	1.00	X						0.	0.	0.
(125) JACKIE NAGGAR TRUSTEE	1.00	X						0.	0.	0.
(126) CAROLYN H. OPPENHEIMER TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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

(A) Name and title	(B) Average hours per week	(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) BETH H. PARADIES TRUSTEE	1.00	X						0.	0.	0.
(128) CHARLOTTE T. MARKS TRUSTEE	1.00	X						0.	0.	0.
(129) SHULAMITH KLEIN TRUSTEE	1.00	X						0.	0.	0.
(130) BARBARA BABBIT KAUFMAN TRUSTEE	1.00	X						0.	0.	0.
(131) MICHAEL I. ILAI TRUSTEE	1.00	X						0.	0.	0.
(132) MICHELE HIRSCH TRUSTEE	1.00	X						0.	0.	0.
(133) HEIDI GELLER TRUSTEE	1.00	X						0.	0.	0.
(134) ERICA GAL TRUSTEE	1.00	X						0.	0.	0.
(135) DAVID B FRANKEL TRUSTEE	1.00	X						0.	0.	0.
(136) ABBEY FLAUM TRUSTEE	1.00	X						0.	0.	0.
(137) RABBI LOUIS FELDSTEIN CHIEF OPERATING OFFICER	40.00			X				177,719.	0.	42,501.
(138) SHEILA KATZ COHEN CHIEF FINANCIAL OFFICER	40.00			X				141,710.	0.	28,326.
(139) MICHAEL HOROWITZ PRESIDENT	55.00			X				52,751.	0.	8,008.
(140) SUSAN G. MORAY VICE PRESIDENT OF PHILANTHROPY	40.00					X		132,105.	0.	25,022.
(141) RICHARD C. RAISLER DIRECTOR OF COMMUNITY SECU	40.00					X		100,057.	0.	13,469.
(142) PHYLLIS D. SILVERSTEIN VICE PRESIDENT OF PLANNED	40.00					X		131,582.	0.	33,761.
(143) RONNETTE THRONE VICE PRESIDENT OF COMMUNITY CAMPAIGN	40.00					X		116,466.	0.	23,570.
Total to Part VII, Section A, line 1c .....								852,390.		174,657.

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	24,697.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	27,968,008.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		21,138,022.				
	<b>h Total.</b> Add lines 1a-1f .....		27,992,705.				
	<b>Program Service Revenue</b>	<b>2 a</b> _____ <b>Business Code</b>					
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> _____							
<b>e</b> _____							
<b>f</b> All other program service revenue .....							
<b>g Total.</b> Add lines 2a-2f .....							
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		1,657,083.			1,657,083.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	(i) Real	62,619.				
		(ii) Personal	0.				
		<b>b</b> Less: rental expenses .....					
		<b>c</b> Rental income or (loss) .....		62,619.			
	<b>d</b> Net rental income or (loss) .....		62,619.			62,619.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	31,052,272.				
		(ii) Other	22,781.				
		<b>b</b> Less: cost or other basis and sales expenses .....		30,636,737.	2.		
		<b>c</b> Gain or (loss) .....		415,535.	22,779.		
	<b>d</b> Net gain or (loss) .....		438,314.			438,314.	
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>					
		<b>b</b> Less: direct expenses .....	<b>b</b>				
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>						
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
	<b>b</b> Less: cost of goods sold .....	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory .....						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> ADMIN. OF FUNDS .....		561000	640,923.	640,923.			
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			640,923.			
<b>12 Total revenue.</b> See instructions. ....			30,791,644.	640,923.	0.	2,158,016.	

**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) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question 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 governments and organizations in the United States. See Part IV, line 21	21,473,089.	21,473,089.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	230,029.	230,029.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	677,700.	166,337.	345,026.	166,337.
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	2,258,706.	936,519.	384,200.	937,987.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	189,951.	76,219.	38,681.	75,051.
9 Other employee benefits	216,230.	85,098.	52,974.	78,158.
10 Payroll taxes	219,680.	87,154.	51,540.	80,986.
11 Fees for services (non-employees):				
a Management				
b Legal	52,796.	25,335.	12,870.	14,591.
c Accounting	71,125.	12,225.	41,425.	17,475.
d Lobbying	18,000.	18,000.		
e Professional fundraising services. See Part IV, line 17	12,969.			12,969.
f Investment management fees				
g Other	336,388.	205,234.	83,785.	47,369.
12 Advertising and promotion	234,194.	176,080.	422.	57,692.
13 Office expenses	135,972.	64,042.	38,992.	32,938.
14 Information technology	258,854.	114,494.	78,865.	65,495.
15 Royalties				
16 Occupancy	23,963.	11,518.	6,889.	5,556.
17 Travel	66,450.	38,916.	7,793.	19,741.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	446,117.	254,812.	16,156.	175,149.
20 Interest	1,245.	1,245.		
21 Payments to affiliates	634,285.	634,285.		
22 Depreciation, depletion, and amortization	178,554.	78,564.	55,352.	44,638.
23 Insurance	35,427.	15,588.	10,982.	8,857.
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 CREDIT CARD FEES	39,530.		39,530.	
b AWARDS AND GIFTS	28,761.	22,863.	2,056.	3,842.
c DUES & SUBSCRIPTIONS	24,893.	4,450.	3,528.	16,915.
d BANK FEES	13,965.		13,965.	
e All other expenses	55,806.	12,191.	33,182.	10,433.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	27,934,679.	24,744,287.	1,318,213.	1,872,179.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				



**Part X Balance Sheet**

		<b>(A)</b>		<b>(B)</b>	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		2,376.	<b>1</b>	2,376.
	<b>2</b> Savings and temporary cash investments .....		11,016,291.	<b>2</b>	14,532,764.
	<b>3</b> Pledges and grants receivable, net .....		10,783,984.	<b>3</b>	11,179,871.
	<b>4</b> Accounts receivable, net .....		711,826.	<b>4</b>	476,364.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....			<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....			<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		999,949.	<b>7</b>	1,012,376.
	<b>8</b> Inventories for sale or use .....			<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....		51,584.	<b>9</b>	62,554.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b>	10,419,912.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b>	3,131,981.		
			7,320,998.	<b>10c</b>	7,287,931.
	<b>11</b> Investments - publicly traded securities .....		69,939,026.	<b>11</b>	66,836,081.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		6,464,543.	<b>12</b>	9,713,081.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....			<b>13</b>	
	<b>14</b> Intangible assets .....			<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 .....		2,052,748.	<b>15</b>	1,417,931.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....		109,343,325.	<b>16</b>	112,521,329.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....		1,572,300.	<b>17</b>	3,496,165.
	<b>18</b> Grants payable .....		9,003,795.	<b>18</b>	8,896,115.
	<b>19</b> Deferred revenue .....			<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		600,000.	<b>20</b>	500,000.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....			<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....			<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....			<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....			<b>24</b>	
<b>25</b> 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 .....		40,535,638.	<b>25</b>	42,485,829.	
<b>26 Total liabilities.</b> Add lines 17 through 25 .....		51,711,733.	<b>26</b>	55,378,109.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....		10,028,246.	<b>27</b>	13,296,990.
	<b>28</b> Temporarily restricted net assets .....		43,149,576.	<b>28</b>	39,392,460.
	<b>29</b> Permanently restricted net assets .....		4,453,770.	<b>29</b>	4,453,770.
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....			<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....			<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....			<b>32</b>	
<b>33</b> Total net assets or fund balances .....		57,631,592.	<b>33</b>	57,143,220.	
<b>34</b> Total liabilities and net assets/fund balances .....		109,343,325.	<b>34</b>	112,521,329.	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	30,791,644.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	27,934,679.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	2,856,965.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	57,631,592.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	-3,345,337.
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	57,143,220.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
<b>1</b>	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.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
<b>2b</b>	Were the organization's financial statements audited by an independent accountant?	X	
<b>2c</b>	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.	X	
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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		
<b>3a</b>	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?		X
<b>b</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.		

Form **990** (2011)

**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. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

**Name of the organization** JEWISH FEDERATION OF GREATER ATLANTA, INC. **Employer identification number** 58-1021791

**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.)
- 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 that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III - Functionally integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....		
(ii) A family member of a person described in (i) above? .....		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....		
- h 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 or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2011

**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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	32,730,803.	33,151,779.	28,486,807.	30,967,116.	27,992,705.	153,329,210.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	32,730,803.	33,151,779.	28,486,807.	30,967,116.	27,992,705.	153,329,210.
<b>5</b> 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) .....						29,940,791.
<b>6 Public support.</b> Subtract line 5 from line 4.						123,388,419.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4 .....	32,730,803.	33,151,779.	28,486,807.	30,967,116.	27,992,705.	153,329,210.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	889,831.	2,600,893.	262,405.	698,852.	1,719,702.	6,171,683.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	1,497,583.					1,497,583.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	927,850.	499,768.	459,063.	500,322.	640,923.	3,027,926.
<b>11 Total support.</b> Add lines 7 through 10						164,026,402.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	75.22	%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 .....	<b>15</b>	79.37	%
<b>16a 33 1/3% support test - 2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2010.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> 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"/>

**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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (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**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2011</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2010</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2011.** 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 - 2010.** 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

**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.**

OMB No. 1545-0047

**2011**

**Name of the organization**

JEWISH FEDERATION OF GREATER  
ATLANTA, INC.

**Employer identification number**

58-1021791

**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 foundation

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

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

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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 of \$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 Part I, line 2 of its Form 990-PF, 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) (2011)

<b>Name of organization</b> JEWISH FEDERATION OF GREATER ATLANTA, INC.	<b>Employer identification number</b> 58-1021791
--	---

**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
1	_____ _____ _____	\$ 9,519,083.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	_____ _____ _____	\$ 920,691.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b> JEWISH FEDERATION OF GREATER ATLANTA, INC.	<b>Employer identification number</b> 58-1021791
--	---

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	196,600 SHARES OF HOME DEPOT, INC. STOCK; PLEDGE <hr/> <hr/> <hr/>	\$ 9,519,083.	01/13/12
2	COLONIAL REALTY 6.25% NOTES DUE 06/15/14 <hr/> <hr/> <hr/>	\$ 133,125.	04/20/12
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____



<b>Name of organization</b> JEWISH FEDERATION OF GREATER ATLANTA, INC.	<b>Employer identification number</b> 58-1021791
--	---

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. 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 information 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

(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

(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

(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

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

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

**2011**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.**

**Open to Public Inspection**

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

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

Name of organization JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number 58-1021791
---	--

**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-.

**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.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....			
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....			
<b>d</b> Other exempt purpose expenditures .....			
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....			
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
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.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....			
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....			
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....			
<b>j</b> 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 instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**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)).**

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....	X		2,267.
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		20,267.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....		X	
<b>j</b> Total. Add lines 1c through 1i .....			22,534.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> 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	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	5	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

---



---



---



---



---



---

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

**Name of the organization** JEWISH FEDERATION OF GREATER ATLANTA, INC.

**Employer identification number**  
58-1021791

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

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year .....	383	
<b>2</b> Aggregate contributions to (during year) .....	14,628,116.	
<b>3</b> Aggregate grants from (during year) .....	14,194,260.	
<b>4</b> Aggregate value at end of year .....	30,733,785.	
<b>5</b> 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
<b>6</b> 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" to Form 990, Part IV, line 7.

**1** Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

**2** Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
<b>a</b> Total number of conservation easements .....	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements .....	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a) .....	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	<b>2d</b>

**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, and enforcing conservation easements during the year ▶ \_\_\_\_\_

**7** Amount of expenses incurred in monitoring, inspecting, 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 XIV, 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" to 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 XIV, 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)** Revenues included in 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** Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

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

▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	<b>1c</b>
d Additions during the year	<b>1d</b>
e Distributions during the year	<b>1e</b>
f Ending balance	<b>1f</b>

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	47,277,680.	40,077,781.	38,130,657.	43,127,771.	
b Contributions	14,949,468.	20,510,379.	15,711,870.	13,172,537.	
c Net investment earnings, gains, and losses	40,207.	5,218,544.	3,090,625.	-6,234,045.	
d Grants or scholarships	15,197,432.	18,210,716.	16,855,371.	11,935,606.	
e Other expenditures for facilities and programs	3,561,269.				
f Administrative expenses	305,466.	318,308.			
g End of year balance	43,203,188.	47,277,680.	40,077,781.	38,130,657.	

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

- a Board designated or quasi-endowment  69.76 %
- b Permanent endowment  10.31 %
- c Temporarily restricted endowment  19.93 %

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

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	808,868.	3,200,000.		4,008,868.
b Buildings		5,556,168.	2,437,907.	3,118,261.
c Leasehold improvements				
d Equipment		854,876.	694,074.	160,802.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				7,287,931.

**Part VII Investments - Other Securities.** 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) HEDGE FUNDS	6,694,655.	END-OF-YEAR MARKET VALUE
(B) ISRAEL BONDS	3,018,426.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	9,713,081.	

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	595,000.
(2) TRUST OBLIGATIONS	2,696,261.
(3) PAYABLE TO OTHER ORGANIZATIONS	39,194,568.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	42,485,829.

**2.** FIN 48 (ASC 740) Footnote. In Part XIV, 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).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

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

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X LINE 2: FIN 48 FOOTNOTE

THE FEDERATION QUALIFIES FOR TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF

THE INTERNAL REVENUE CODE (THE "CODE") AS A CHARITABLE ORGANIZATION

WHEREBY ONLY UNRELATED BUSINESS INCOME, IF ANY, AS DEFINED BY SECTION

512(A)(1) OF THE CODE, IS SUBJECT TO FEDERAL INCOME TAX.

MANAGEMENT BELIEVES THE FEDERATION MET THE REQUIREMENTS TO MAINTAIN THEIR



**Part XIV** Supplemental Information (continued)

TAX-EXEMPT STATUS; THEREFORE, NO PROVISION FOR INCOME TAXES ON EXEMPT PURPOSES HAS BEEN PROVIDED IN THESE FINANCIAL STATEMENTS.

INCOME NOT RELATED TO TAX EXEMPT PURPOSES IS SUBJECT TO INCOME TAXES. A FEDERATION DONOR ADVISED FUND INCURRED UNRELATED BUSINESS INCOME ON AN INVESTMENT SEVERAL YEARS AGO. THE FEDERATION ACCRUED APPROXIMATELY \$595,000 OF INCOME TAXES AND \$455,000 IN ASSOCIATED INTEREST AND PENALTIES DURING THE YEAR ENDED JUNE 30, 2011 FOR THIS INCOME. SUCH INTEREST AND PENALTIES ARE INCLUDED IN MANAGEMENT AND GENERAL EXPENSES IN THE CONSOLIDATED STATEMENT OF ACTIVITIES.

AS OF AND FOR THE YEARS ENDED JUNE 30, 2012 AND 2011, THE FEDERATION DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE FEDERATION'S INCOME TAX RETURNS SINCE THE YEAR ENDED JUNE 30, 2010 ARE SUBJECT TO EXAMINATION BY TAX AUTHORITIES, AND MAY CHANGE UPON EXAMINATION.

PART V, LINE 4: ENDOWMENT FUNDS ARE INTENDED TO SUPPORT CULTURAL, SOCIAL WELFARE AND EDUCATIONAL PROGRAMS.

**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" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.**

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization **JEWISH FEDERATION OF GREATER  
ATLANTA, INC.**

**Employer identification number**  
58-1021791

**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 Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ACUMEN FUND, INC. 76 NINTH AVENUE, STE 315 NEW YORK, NY 10011	13-4166228	501(C)(3)	5,000.	0.			DONATION
ADAMAH ADVENTURES, INC. 1440 SPRING STREET ATLANTA, GA 30309	26-2777198	501(C)(3)	6,440.	0.			DONATION
AHAVATH ACHIM SYNAGOGUE 600 PEACHTREE BATTLE AVE. NW ATLANTA, GA 30327	58-2360915	501(C)(3)	176,669.	0.			DONATION
ALLIANCE THEATRE 1280 PEACHTREE ST NE ATLANTA, GA 30309	58-2627786	501(C)(3)	31,560.	0.			DONATION
AMERICAN CANCER SOCIETY 6500 SUGARLOAF PKWY, STE 260 DULUTH, GA 30097	58-0659875	501(C)(3)	5,250.	0.			DONATION
AMERICAN FRIENDS OF HERZOG HOSPITAL - 136 EAST 57TH ST STE 803 - NEW YORK, NY 10022	13-5655183	501(C)(3)	60,000.	0.			DONATION

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table  **148.**
- 3** Enter total number of other organizations listed in the line 1 table  **0.**

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

Schedule I (Form 990) (2011)

**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 THE HEBREW UNIVERSITY - 1 BATTERY PARK PLZ, FL 25 - NEW YORK, NY 10004-1405	13-1568923	501(C)(3)	20,600.	0.			DONATION
AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE - 1266 WEST PACES FERRY ROAD SUITE 615 - ATLANTA, GA 30327	13-3348313	501(C)(3)	7,548,750.	0.			DONATION
AMERICAN GROUP PSYCHOTHERAPY ASSOCIATION, INC. - 25 EAST 21ST ST, 6TH FLOOR - NEW YORK, NY 10010	13-1876348	501(C)(3)	5,000.	0.			DONATION
AMERICAN JEWISH COMMITTEE 6 PIEDMONT CENTER NE SUITE 510 ATLANTA, GA 30305	13-5563393	501(C)(3)	95,230.	0.			DONATION
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET, 11TH FLOOR NEW YORK, NY 10018-7904	22-2584370	501(C)(3)	10,180.	0.			DONATION
ANTI-DEFAMATION LEAGUE 605 THIRD AVE - 9TH FLOOR NEW YORK, NY 10158-3560	13-1818723	501(C)(3)	21,900.	0.			DONATION
ANTI-DEFAMATION LEAGUE - SE REGIONAL - 3490 PIEDMONT RD, STE 610 - ATLANTA, GA 30305	13-2887439	501(C)(3)	95,666.	0.			DONATION
ATLANTA COMMUNITY FOOD BANK 732 JOSEPH E. LOWERY BLVD NW ATLANTA, GA 30318-6628	58-1376648	501(C)(3)	17,025.	0.			DONATION
ATLANTA SCHOLARS KOLLEL 1959 LAVISTA RD. NE ATLANTA, GA 30329	58-1750850	501(C)(3)	92,413.	0.			DONATION

**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
ATLANTA SPEECH SCHOOL 3160 NORTHSIDE PKWY, NW ATLANTA, GA 30327	58-0566198	501(C)(3)	5,700.	0.			DONATION
BATYA-FRIENDS OF UNITED HATZALAH, INC. - 208 EAST 51ST ST, STE 303 - NEW YORK, NY 10022	11-3533002	501(C)(3)	13,100.	0.			DONATION
BETH JACOB HIGH SCHOOL OF DENVER 5100 WEST 14TH AVENUE DENVER, CO 80204	84-0585743	501(C)(3)	10,608.	0.			DONATION
BIRTHRIGHT ISRAEL FOUNDATION 33 EAST 33RD ST, 7TH FLOOR NEW YORK, NY 10016	13-4092050	501(C)(3)	26,177.	0.			DONATION
CAMP JUDEAEA 2700 NE EXPRESSWAY, C-500 ATLANTA, GA 30345	58-6014651	501(C)(3)	7,720.	0.			DONATION
CAMP RAMAH DAROM 6400 POWERS FERRY RD. NW SUITE 215 ATLANTA, GA 30339	58-2146741	501(C)(3)	16,348.	0.			DONATION
CAMP TWIN LAKES 600 MEANS STREET SUITE 110 ATLANTA, GA 30318-5799	58-1826782	501(C)(3)	22,925.	0.			DONATION
CAPOEIRA ARTS FOUNDATION 1901 SAN PABLO AVE BERKELEY, CA 94702	94-2853995	501(C)(3)	5,000.	0.			DONATION
CENTER FOR ISRAEL EDUCATION, INC. PO BOX 15129 ATLANTA, GA 30333	26-0220636	501(C)(3)	14,535.	0.			DONATION

**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
CHABAD INTOWN 928 PONCE DE LEON AVENUE ATLANTA, GA 30306	58-2451913	501(C)(3)	7,311.	0.			DONATION
CHABAD OF GEORGIA 5065 HIGHPOINT ROAD NE ATLANTA, GA 30342-2312	58-1822788	501(C)(3)	9,913.	0.			DONATION
CHILDREN OF FALLEN PATRIOTS FOUNDATION - PO BOX 181 - OLD GREENWICH, CT 06870	47-0902295	501(C)(3)	5,000.	0.			DONATION
CHOPIN SOCIETY OF ATLANTA 10700 STATE BRIDGE RD, #12 JOHNS CREEK, GA 30022	58-2595252	501(C)(3)	5,100.	0.			DONATION
COBB ENERGY PERFORMING ARTS CENTRE FOUNDATION, INC. - 2800 COBB GALLERIA PARKWAY - ATLANTA, GA 30339	20-1638556	501(C)(3)	10,000.	0.			DONATION
COMMUNITY FOR ADVANCED PRACTICE & NURSE, INC. - 173 BOULEVARD NE - ATLANTA, GA 30312-1313	58-2435328	501(C)(3)	14,450.	0.			DONATION
CONGREGATION BETH JACOB 1855 LAVISTA ROAD NE ATLANTA, GA 30329-3819	58-0833315	501(C)(3)	93,334.	0.			DONATION
CONGREGATION BETH SHALOM 5303 WINTERS CHAPEL ROAD ATLANTA, GA 30360	58-6134936	501(C)(3)	74,356.	0.			DONATION
CONGREGATION BETH TEFILLAH 5065 HIGH POINT RD NE ATLANTA, GA 30342	58-2219431	501(C)(3)	13,872.	0.			DONATION

**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
CONGREGATION BNAI TORAH 700 MOUNT VERNON HWY, NE ATLANTA, GA 30328	58-1419696	501(C)(3)	74,986.	0.			DONATION
CONGREGATION DOR TAMID 11165 PARSONS ROAD JOHNS CREEK, GA 30097	58-2490691	501(C)(3)	5,327.	0.			DONATION
CONGREGATION ETZ CHAIM 1190 INDIAN HILLS PKWY MARIETTA, GA 30068	58-1245765	501(C)(3)	70,393.	0.			DONATION
CONGREGATION NER HAMIZRACH 1858 LAVISTA RD NE ATLANTA, GA 30329	58-1799365	501(C)(3)	7,550.	0.			DONATION
CONGREGATION OR HADASH 6751 ROSWELL RD SUITE 127 ATLANTA, GA 30328	06-1690352	501(C)(3)	64,576.	0.			DONATION
CONGREGATION OR VESHALOM 1681 N DRUID HILLS RD, NE ATLANTA, GA 30319-4155	58-0899565	501(C)(3)	12,491.	0.			DONATION
CONGREGATION SHEARITH ISRAEL 1180 UNIVERSITY DR NE ATLANTA, GA 30306	58-0636207	501(C)(3)	36,306.	0.			DONATION
CREATIVE VISIONS C/O HBA DESIGNS 3216 NEBRASKA AVE SANTA MONICA, CA 90404	42-1461559	501(C)(3)	20,500.	0.			DONATION
CROHNS & COLITIS FOUNDATION OF AMERICA - 2250 NORTH DRUID HILLS ROAD NE - STE 250 - ATLANTA, GA 30329	13-6193105	501(C)(3)	29,950.	0.			DONATION

**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
DO SOMETHING, INC. 24-32 UNION SQUARE EAST, 4TH FLOOR NEW YORK, NY 10003	13-3720473	501(C)(3)	5,000.	0.			DONATION
EMORY UNIVERSITY THE SAM BREDOW MEMORIAL SCHOLARSHIP FUND, 301 DOWMAN DR, WHITE HALL, STE 300	58-2004368	501(C)(3)	9,700.	0.			DONATION
EMORY UNIVERSITY - MICHAEL C. CARLOS MUSEUM - 1762 CLIFTON RD NE, PLAZA 1000 - ATLANTA, GA 30322-4001	58-0566256	501(C)(3)	13,380.	0.			DONATION
ENCOUNTER PROGRAMS, INC. 25 BROADWAY STREET, STE 1700 NEW YORK, NY 10004	26-0593832	501(C)(3)	10,000.	0.			DONATION
FEDERATION OF JEWISH COMMUNITIES OF CIS - 410 PARK AVE STE 1500 - NEW YORK, NY 10022	13-3970940	501(C)(3)	13,000.	0.			DONATION
FIRST CONGREGATIONAL CHURCH 125 ELLIS ST, NE ATLANTA, GA 30303	58-0840355	501(C)(3)	25,000.	0.			DONATION
FLAGLER COLLEGE PO BOX 1027 ST. AUGUSTINE, FL 32085-1027	54-0224117	501(C)(3)	5,000.	0.			DONATION
FOSTER CARE SUPPORT FOUNDATION, INC. - 3334 TRAILS END ROAD - ROSWELL, GA 30075	58-2540031	501(C)(3)	10,000.	0.			DONATION
FRAGILE KIDS FOUNDATION 3350 RIVERWOOD PARKWAY SE SUITE 14 ATLANTA, GA 30339	58-1915583	501(C)(3)	14,500.	0.			DONATION

**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
FRIENDS OF ISRAEL DEFENSE FORCES 1430 BROADWAY, ROOM 1301 NEW YORK, NY 10018	13-3156445	501(C)(3)	18,825.	0.			DONATION
FRIENDS OF YEMIN ORDE 12230 WILKINS AVENUE ROCKVILLE, MD 20852	22-3090463	501(C)(3)	72,450.	0.			DONATION
FULTON COUNTY CASA 395 PRYOR ST, STE 4106 ATLANTA, GA 30312	58-2330915	501(C)(3)	10,000.	0.			DONATION
GEORGIA JUSTICE PROJECT 438 EDGEWOOD AVE, NE ATLANTA, GA 30312	58-1917659	501(C)(3)	5,100.	0.			DONATION
GEORGIA STATE UNIVERSITY FOUNDATION, INC. - PO BOX 3984 - ATLANTA, GA 30302-3984	58-6002050	501(C)(3)	8,350.	0.			DONATION
GEORGIA STATE UNIVERSITY FOUNDATION, INC. - GILEE - P.O. BOX 4018 - ATLANTA, GA 30302	58-6033185	501(C)(3)	6,650.	0.			DONATION
GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION, INC. - PO BOX 3999 - ATLANTA, GA 30302-3999	58-1845423	501(C)(3)	5,000.	0.			DONATION
GEORGIA TECH FOUNDATION 760 SPRING STREET NW STE 400 ATLANTA, GA 30308	58-6043294	501(C)(3)	20,200.	0.			DONATION
HADASSAH 50 WEST 58TH STREET NEW YORK, NY 10019	13-1656651	501(C)(3)	8,200.	0.			DONATION



**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
HADASSAH - ATLANTA 47 PERIMETER CENTER E SUITE 210 ATLANTA, GA 30346-2001	58-6032056	501(C)(3)	9,210.	0.			DONATION
HARVARD ART MUSEUM 32 QUINCY STREET CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	20,000.	0.			DONATION
HILLEL FOUNDATION FOR JEWISH CAMPUS LIFE - 800 EIGHTH ST NW - WASHINGTON, DC 20001	52-1844823	501(C)(3)	10,550.	0.			DONATION
HILLELS OF GEORGIA 735 GATEWOOD ROAD, NE ATLANTA, GA 30322	58-2051970	501(C)(3)	406,286.	0.			DONATION
HINMAN DENTAL SOCIETY C/O SYLVIA RATCHFORD 33 LENOX POIN ATLANTA, GA 30324-3170	58-6035113	501(C)(3)	44,180.	0.			DONATION
HOBART AND WILILAM SMITH COLLEGES 615 SOUTH MAIN STREET, ALUMNI HOUS GENEVA, NY 14456	16-0743040	501(C)(3)	5,000.	0.			DONATION
HORIZON THEATRE COMPANY, INC. P.O. BOX 5376 ATLANTA, GA 31107	58-1576913	501(C)(3)	8,600.	0.			DONATION
HOSEA FEED THE HUNGRY P O BOX 4672 ATLANTA, GA 30302-4672	58-1340903	501(C)(3)	25,100.	0.			DONATION
IAN'S FRIENDS FOUNDATION 855 MARSEILLES DR. ATLANTA, GA 30327	56-2571902	501(C)(3)	18,600.	0.			DONATION

**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
JEWISH AGENCY FOR ISRAEL C/O HANNA BOROWIK 633 3RD AVENUE NEW YORK, NY 10017	23-0053483	501(C)(3)	10,179.	0.			DONATION
JEWISH COMMUNITY FOUNDATION OF SAN DIEGO - 4950 MURPHY CANYON RD, #100 - SAN DIEGO, CA 92123	95-2504044	501(C)(3)	6,481.	0.			DONATION
JEWISH COMMUNITY RELATIONS COUNCIL OF ATLANTA, INC. - 4838 DUNWOODY JCT - DUNWOODY, GA 30338	27-1545032	501(C)(3)	5,100.	0.			DONATION
JEWISH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY RD ATLANTA, GA 30338-6210	58-1479212	501(C)(3)	1,602,193.	0.			DONATION
JEWISH FEDERATION OF GREATER LOS ANGELES - 6505 WILSHIRE BLVD - LOS ANGELES, CA 90048	95-1643388	501(C)(3)	19,000.	0.			DONATION
JEWISH FEDERATIONS OF NORTH AMERICA - 25 BROADWAY - SUITE 1700 - NEW YORK, NY 10004	13-1624240	501(C)(3)	3,329,314.	0.			DONATION
JEWISH HEALTHCARE INTERNATIONAL 1440 SPRING STREET ATLANTA, GA 30309	58-2584574	501(C)(3)	39,368.	0.			DONATION
JEWISH INTEREST FREE LOAN OF ATLANTA, INC. - 5115 NEW PEACHTREE RD, STE 200A - CHAMBLEE, GA 30341	27-3711475	501(C)(3)	5,100.	0.			DONATION
JEWISH KIDS GROUP 1969 NORTH DECATUR RD ATLANTA, GA 30307	08-2785628	501(C)(3)	7,000.	0.			DONATION

**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
JEWISH NATIONAL FUND 6065 ROSWELL RD, STE 214 ATLANTA, GA 30328	13-1659627	501(C)(3)	53,007.	0.			DONATION
JUVENILE DIABETES RESEARCH FOUNDATION - 3525 PIEDMONT RD NE BLDG 6-STE 300 - ATLANTA, GA 30305-7023	23-1907729	501(C)(3)	8,700.	0.			DONATION
KATHERINE & JACOB GREENFIELD HEBREW ACADEMY - 5200 NORTHLAND DRIVE - ATLANTA, GA 30342-2008	58-0629788	501(C)(3)	324,787.	0.			DONATION
KEHILA CHADASHA 2305 ECCLESTON ST SILVER SPRINGS, MD 20902	52-1732440	501(C)(3)	5,000.	0.			DONATION
LIFESPAN RESOURCES 303 HOWELL MILL RD ATLANTA, GA 30327	58-1479860	501(C)(3)	17,901.	0.			DONATION
LITERACY ACTION, INC. 100 EDGEWATER AVENUE NE ATLANTA, GA 30303	58-1053728	501(C)(3)	10,000.	0.			DONATION
MANHATTAN HIGH SCHOOL FOR GIRLS 154 EAST 70TH STREET NEW YORK, NY 10021	13-3709401	501(C)(3)	6,800.	0.			DONATION
MARCUS AUTISM CENTER 1920 BRIARCLIFF ROAD N.E. ATLANTA, GA 30329-9944	26-2809380	501(C)(3)	6,000.	0.			DONATION
MARCUS JEWISH COMMUNITY CENTER OF ATLANTA INC. - 5342 TILLY MILL ROAD - DUNWOODY, GA 30338	58-0566126	501(C)(3)	1,726,303.	0.			DONATION

**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
MARY HALL FREEDOM HOUSE 200 HANNOVER PARK ROAD SUITE 100 ATLANTA, GA 30350	58-2238354	501(C)(3)	14,000.	0.			DONATION
MAYO CLINIC 4500 SAN PABLO RD JACKSONVILLE, FL 32224	41-6011702	501(C)(3)	27,000.	0.			DONATION
MAZON - A JEWISH RESPONSE TO HUNGER - 10495 SANTA MONICA BLVD. SUITE 100 SUITE 260 - LOS ANGELES, CA 90025	22-2624532	501(C)(3)	7,785.	0.			DONATION
MEDSHARE INTERNATIONAL 3240 CLIFTON SPRINGS RD DECATUR, GA 30034-4608	58-2433968	501(C)(3)	7,600.	0.			DONATION
MIAMI ART MUSEUM 101 WEST FLAGLER ST. MIAMI, FL 33130	59-2048869	501(C)(3)	8,000.	0.			DONATION
MILL SPRINGS ACADEMY INC. 13660 NEW PROVIDENCE ROAD ALPHARETTA, GA 30004	58-1432397	501(C)(3)	8,989.	0.			DONATION
MOREHOUSE COLLEGE 830 WESTVIEW DRIVE, SW ATLANTA, GA 30314-3773	58-0566205	501(C)(3)	25,000.	0.			DONATION
MOREHOUSE SCHOOL OF MEDICINE 720 WESTVIEW DR SW ATLANTA, GA 30310	58-1438873	501(C)(3)	15,000.	0.			DONATION
MUCOLIPIDOSIS IV FOUNDATION 719 EAST 17TH ST. BROOKLYN, NY 11230	13-3633501	501(C)(3)	5,080.	0.			DONATION

**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
MUTT MADD-NESS, INC. P.O. BOX 71821 MARIETTA, GA 30007	26-3867255	501(C)(3)	10,000.	0.			DONATION
NAACP 4805 MT. HOPE DRIVE BALTIMORE, MD 21215	13-1998814	501(C)(3)	25,000.	0.			DONATION
NATIONAL CENTER FOR CIVIL AND HUMAN RIGHTS - 55 IVAN ALLEN BLVD, STE 510 - ATLANTA, GA 30308	26-0813637	501(C)(3)	5,000.	0.			DONATION
NOAHS ARK 712 LOCUS GROVE RD LOCUS GROVE, GA 30248	58-1909303	501(C)(3)	10,000.	0.			DONATION
ONE GOOD DEED 1308 VISTA LEAF DR DECATUR, GA 30033-2031	20-4157498	501(C)(3)	19,467.	0.			DONATION
ORT ATLANTA 2200 CENTURY PKWY NE, STE 160 ATLANTA, GA 30345-3149	13-5562424	501(C)(3)	25,600.	0.			DONATION
PACE ACADEMY 966 W PACES FERRY RD NW ATLANTA, GA 30327	58-0706812	501(C)(3)	10,750.	0.			DONATION
PAIDEIA SCHOOL 1509 PONCE DE LEON AVE ATLANTA, GA 30307	23-7089522	501(C)(3)	11,600.	0.			DONATION
PARTNERSHIP FOR A JEWISH CENTER 3622 LYEKAN PKWY, STE 6002 DURHAM, NC 27707	26-1443727	501(C)(3)	7,658.	0.			DONATION

**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
PIEDMONT HOSPITAL 1968 PEACHTREE ROAD NW ATLANTA, GA 30309	58-0566213	501(C)(3)	10,300.	0.			DONATION
PLANNED PARENTHOOD SOUTHEAST 75 PIEDMONT AVENUE SUITE 800 ATLANTA, GA 30303	58-6045874	501(C)(3)	38,150.	0.			DONATION
POVERTY IS REAL 230 E PONCE DE LEON AVE, STE 427 DECATUR, GA 30030	27-5410870	501(C)(3)	12,500.	0.			DONATION
PROCLAIMING JUSTICE TO THE NATIONS, INC. - P.O. BOX 682711 - FRANKLIN, TN 37068	20-3144206	501(C)(3)	20,000.	0.			DONATION
ROBERT W WOODRUFF ARTS CENTER 1280 PEACHTREE ST NE SUITE 4074 ATLANTA, GA 30309	58-0633971	501(C)(3)	54,200.	0.			DONATION
SADIE G. MAYS HEALTH & REHABILITATION CENTER - 1821 ANDERSON AVE, NW - ATLANTA, GA 30314-3773	58-0593384	501(C)(3)	25,000.	0.			DONATION
SHEARITH ISREAL SHELTER, INC. 1180 UNIVERSITY DR, NE ATLANTA, GA 30306	27-4116748	501(C)(3)	6,995.	0.			DONATION
SOUTH PALM BEACH CO. JEWISH FEDERATION - 9901 DONNA KLEIN BLVD - BOCA RATON, FL 33428	59-1945109	501(C)(3)	11,465.	0.			DONATION
SUSAN G. KOMEN FOR THE CURE, GREATER ATLANTA AFFILIATE - 4840 ROSWELL RD BUILDING D, SUITE 100 - ATLANTA, GA 30342-2669	58-1959763	501(C)(3)	6,851.	0.			DONATION

**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
TEMIMA JEWISH HIGH SCHOOL FOR GIRLS - 1985-B LAVISTA ROAD - ATLANTA, GA 30329	58-2475208	501(C)(3)	70,001.	0.			DONATION
TEMPLE EMANU-EL 1580 SPALDING DRIVE DUNWOODY, GA 30350	58-1339998	501(C)(3)	58,240.	0.			DONATION
TEMPLE ISRAEL 511 BAYTREE RD VALDOSTA, GA 31603	58-2357175	501(C)(3)	8,680.	0.			DONATION
TEMPLE SINAI 5645 DUPREE DRIVE NW ATLANTA, GA 30327-4303	58-1033792	501(C)(3)	82,575.	0.			DONATION
THE ALFRED & ADELE DAVIS ACADEMY 8105 ROBERTS DRIVE ATLANTA, GA 30350	58-1970181	501(C)(3)	435,725.	0.			DONATION
THE AMIT PROGRAM, INC. 6255 BARFIELD RD NE STE 100 ATLANTA, GA 30328-4332	02-0585331	501(C)(3)	93,727.	0.			DONATION
THE ATLANTA WOMEN'S FOUNDATION 50 HURT PLAZA, THE HURT BUILDING, ATLANTA, GA 30303	58-2389721	501(C)(3)	5,500.	0.			DONATION
THE DORIS & ALEX WEBER JEWISH COMMUNITY HIGH SCHOOL - 6751 ROSWELL ROAD - ATLANTA, GA 30328-2501	58-2207654	501(C)(3)	242,772.	0.			DONATION
THE EPSTEIN SCHOOL 335 COLEWOOD WAY NW ATLANTA, GA 30328-2956	58-2022685	501(C)(3)	336,150.	0.			DONATION

**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
THE GALLOWAY SCHOOL 215 W WIEUCA RD, NW ATLANTA, GA 30342	58-1052217	501(C)(3)	6,600.	0.			DONATION
THE STANFORD FUND 326 GALVEZ ST STANFORD, CA 94305	94-1156365	501(C)(3)	6,000.	0.			DONATION
THE TEMPLE 1589 PEACHTREE ST. NE ATLANTA, GA 30309-2401	58-1083581	501(C)(3)	69,360.	0.			DONATION
THE WEINSTEIN HOSPICE 3150 HOWELL MILL ROAD NW ATLANTA, GA 30327-2108	58-2483753	501(C)(3)	15,310.	0.			DONATION
THE WILLIAM BREMAN JEWISH HERITAGE MUSEUM INC. - 1440 SPRING STREET NW - ATLANTA, GA 30309	02-0541872	501(C)(3)	219,836.	0.			DONATION
TORAH DAY SCHOOL OF ATLANTA 1985 LAVISTA ROAD NE ATLANTA, GA 30329	58-1594193	501(C)(3)	323,566.	0.			DONATION
UNICEF 125 MADISON LANE, 10TH FLOOR NEW YORK, NY 10038	13-1760110	501(C)(3)	13,100.	0.			DONATION
UNION FOR REFORM JUDAISM 633 THIRD AVE, 7TH FLOOR NEW YORK, NY 10017	13-1663143	501(C)(3)	11,940.	0.			DONATION
UNITED NEGRO COLLEGE FUND 229 PEACHTREE ST., STE 2350 ATLANTA, GA 30303	13-1624241	501(C)(3)	25,000.	0.			DONATION



**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
UNITED STATES JAPAN FOUNDATION 145 EAST 32ND ST, NEW YORK, NY 10016	13-3054425	501(C)(3)	5,000.	0.			DONATION
UNITED WAY OF METROPOLITAN ATLANTA 100 EDGEWOOD AVE NE ATLANTA, GA 30303-3026	58-0566194	501(C)(3)	24,350.	0.			DONATION
UNIVERSITY OF TEXAS P.O. BOX 7278 AUSTIN, TX 78713	74-1587488	501(C)(3)	5,100.	0.			DONATION
URBAN YOUTH HARP ENSEMBLE INC. 3259 BRIARWOOD BLVD. EAST POINT, GA 30344	52-2440625	501(C)(3)	10,000.	0.			DONATION
VISITING NURSE HOSPICE ATLANTA 5775 GLENRIDGE DR, NE, STE E200 ATLANTA, GA 30328	58-0566250	501(C)(3)	8,400.	0.			DONATION
WALTON RAIDER DOUGOUT CLUB, INC. 1590 BILL MURDOCK RD MARIETTA, GA 30062	26-4272199	501(C)(3)	50,000.	0.			DONATION
WEIZMANN INSTITUTE OF SCIENCE - AMERICAN COMMITTEE - 633 3RD AVE, 20TH FLOOR - NEW YORK, NY 10017	13-1623886	501(C)(3)	5,800.	0.			DONATION
WILLIAM BREMAN JEWISH HOME 3150 HOWELL MILL ROAD NW ATLANTA, GA 30327	58-0610059	501(C)(3)	746,962.	0.			DONATION
WILLIAM J. CLINTON FOUNDATION 610 PRESIDENT CLINTON AVE LITTLE ROCK, AR 72201	31-1580204	501(C)(3)	25,000.	0.			DONATION

**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
WOODWARD ACADEMY ADVANCEMENT OFFICE 1662 RUGBY AVE. COLLEGE PARK, GA 30337-2199	58-0625584	501(C)(3)	11,100.	0.			DONATION
WORLD UNION PROGRESSIVE JUDAISM 633 THIRD AVENUE 3RD FLOOR NEW YORK, NY 10164-4081	13-1930176	501(C)(3)	63,672.	0.			DONATION
YAD L YAD CHARITY FUND INC. 2897 N. DRUID HILLS ROAD SUITE 205 ATLANTA, GA 30329	20-8280567	501(C)(3)	7,102.	0.			DONATION
YAD YISROEL, INC. 1070 38TH ST BROOKLYN, NY 11219	11-3150521	501(C)(3)	22,508.	0.			DONATION
YESHIVA HIGH SCHOOL OF ATLANTA 3130 RAYMOND DR ATLANTA, GA 30340-1827	58-1088687	501(C)(3)	127,787.	0.			DONATION
YESHIVA OHR YISRAEL OF ATLANTA, INC - 1458 HOLLY LANE, NE - ATLANTA, GA 30329	80-0025717	501(C)(3)	30,560.	0.			DONATION
YOUNG ISRAEL OF TOCO HILLS 2910 N DRUID HILLS RD NE #E1 ATLANTA, GA 30329	58-2159691	501(C)(3)	47,371.	0.			DONATION

**Part III** **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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
GRANTS TO SUBSIDIZE PARTICIPATION IN APPROVED ISRAEL EXPERIENCE PROGRAMS FOR QUALIFIED YOUTH	90	60,150.	0.		
GRANTS TO SUBSIDIZE PARTICIPATION IN PJ LIBRARY PROGRAM FOR QUALIFIED YOUTH	3300	169,879.	0.		

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

GRANTS TO ORGANIZATIONS ARE MADE ONLY TO TAX EXEMPT ORGANIZATIONS FOR

THE FURTHERANCE OF THE GRANTEE ORGANIZATION'S EXEMPT PURPOSE. GRANTS TO

INDIVIDUALS ARE PAID DIRECTLY TO APPROVED PROGRAM PROVIDERS AND ARE

CONDITIONED ON THE GRANTEE'S PARTICIPATION IN THE PROGRAM.

SCHEDULE I, PART II

JEWISH FEDERATION OF GREATER ATLANTA 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,

**Part IV Supplemental Information**

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.

Multiple horizontal lines for supplemental information.

**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" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization **JEWISH FEDERATION OF GREATER ATLANTA, INC.**

Employer identification number  
**58-1021791**

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</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 .....	<b>1b</b>	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....	<b>2</b>	
<b>3</b> 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. Explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: <b>a</b> Receive a severance payment or change-of-control payment? .....	<b>4a</b>	X
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....	<b>4b</b>	X
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....	<b>4c</b>	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <b>a</b> The organization? .....	<b>5a</b>	X
<b>b</b> Any related organization? .....	<b>5b</b>	X
If "Yes" to line 5a or 5b, describe in Part III.		
<b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <b>a</b> The organization? .....	<b>6a</b>	X
<b>b</b> Any related organization? .....	<b>6b</b>	X
If "Yes" to line 6a or 6b, describe in Part III.		
<b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....	<b>7</b>	X
<b>8</b> Were any amounts reported in 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 .....	<b>8</b>	X
<b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....	<b>9</b>	

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

Schedule J (Form 990) 2011

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

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

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

(A) Name		(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 reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 RABBI LOUIS FELDSTEIN	(i)	177,719.	0.	0.	20,244.	22,257.	220,220.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 SHEILA KATZ COHEN	(i)	141,710.	0.	0.	16,182.	12,144.	170,036.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 SUSAN G. MORAY	(i)	132,105.	0.	0.	15,621.	9,401.	157,127.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 PHYLLIS D. SILVERSTEIN	(i)	131,582.	0.	0.	14,829.	18,932.	165,343.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE L  
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2011

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ 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. ▶ See separate instructions.

Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC. Employer identification number 58-1021791

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) 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.

Table with 3 main columns: (a) Name of disqualified person, (b) Description of transaction, (c) Corrected? (Yes/No)

2 Enter the amount of tax imposed on 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, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

Table with 7 main columns: (a) Name of interested person and purpose, (b) Loan to or from the organization? (To/From), (c) Original principal amount, (d) Balance due, (e) In default? (Yes/No), (f) Approved by board or committee? (Yes/No), (g) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

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

Table with 3 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount and type of assistance

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
IDLEWOOD PROPERTIES, INC.	CURRENT TRUSTEES OF	51,275.	MANAGEMENT		X

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: IDLEWOOD PROPERTIES, INC.

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

CURRENT TRUSTEES OF THE ORG. ARE OFFICERS OF IDLEWOOD PROPERTIES, INC.

(C) AMOUNT OF TRANSACTION \$ 51,275.

(D) DESCRIPTION OF TRANSACTION: MANAGEMENT SERVICES

(E) SHARING OF ORGANIZATION REVENUES? = NO



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **JEWISH FEDERATION OF GREATER ATLANTA, INC.** Employer identification number **58-1021791**

**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				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	314	11,676,300.	PROCEEDS OF SALES
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( PLEDGES )	X	3,834	9,437,025.	AMOUNT PLEDGED
26 Other ( GRANTS REC )	X	1	24,697.	AMOUNT DUE
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 1-28 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) (2011)

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

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization	JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number	58-1021791
--------------------------	---	--------------------------------	------------

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

THE VULNERABLE, RESCUE THE IMPERILED, AND STRENGTHEN THE JEWISH  
COMMUNITY IN ATLANTA, IN ISRAEL, AND AROUND THE WORLD.

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

JEWISH PROGRAMMING PROVIDED BY MULTIPLE AFFILIATE AGENCIES. WE ALSO  
STRIVE TO CONNECT NEW MEMBERS OF OUR COMMUNITY WITH OUR ORGANIZATION  
THROUGH THE YOUNG LEADERSHIP COUNCIL/ENGAGEMENT INITIATIVE. THROUGH  
PROGRAMS AND EDUCATIONAL EVENTS, THIS INITIATIVE HAS BROUGHT THOUSANDS  
INTO CONTACT WITH FEDERATION, AND MANY OF THEM HAVE BECOME ENGAGED WITH  
THE COMMUNITY.

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

PHILANTHROPY. THROUGH FACE-TO-FACE MEETINGS, JFGA PROFESSIONALS AND  
VOLUNTEERS LEARN ABOUT CONCERNS WITHIN THE COMMUNITY AND WORK TO ENSURE  
NEEDS ARE MET AND PROGRAMS ARE CREATED TO MAKE PHILANTHROPIC DREAMS  
WITHIN JEWISH ATLANTA BECOME A REALITY.

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

OTHER PROGRAMS AND SERVICES  
EXPENSES \$ 1,142,852. INCL GRANTS OF \$ 1,113,857. REVENUE \$ 640,923.

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

ELIOT ARNOVITZ	BUSINESS
ELLEN ARNOVITZ	FAMILY
BETH W. AROGETI	FAMILY

Name of the organization	JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number	58-1021791
--------------------------	---	--------------------------------	------------

ROBERT J. AROGETI            FAMILY & BUSINESS

BOB AROTSKY                FAMILY

DAVID F. BIRNBREY        FAMILY

HENRY BIRNBREY          FAMILY

JOANNE BIRNBREY         FAMILY

CAROL Z. COOPER         FAMILY

LARRY E. COOPER         FAMILY

ANN L. DAVIS              FAMILY

ANDREW DEUTSCH         FAMILY

SAMMY GRANT              FAMILY

JACK HALPERN             FAMILY & BUSINESS

LISA C. HAYNOR          BUSINESS

DAVID HIRSCH             FAMILY

MICHELE HIRSCH         FAMILY

MARTIN KOGON             FAMILY & BUSINESS

MICHAEL KOGON          FAMILY

ROSS A. KOGON            FAMILY & BUSINESS

GREG LEWIS                FAMILY

BERNARD MARCUS         FAMILY

BELINDA MORRIS         FAMILY

CAROLYN OPPENHEIMER    FAMILY & BUSINESS

MICHAEL PLASKER         FAMILY & BUSINESS

CATHY SELIG              FAMILY & BUSINESS

LINDA SELIG              FAMILY

S. STEPHEN SELIG III    FAMILY & BUSINESS

MINDY SELIG-SHOULBERG   FAMILY

DAVID WITT                FAMILY

JAY DAVIS                 FAMILY

132212  
01-23-12

Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number 58-1021791
---	--

LYNN HALPERN FAMILY

SETH COHEN FAMILY

FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE AMENDED TO  
 STREAMLINE THE MANAGEMENT OF THE FEDERATION BY CLARIFYING THE  
 DECISION-MAKING AUTHORITY AND STRUCTURE OF THE FEDERATION. THE  
 AMENDEDMENTS TO THE BYLAWS WERE ADOPTED ON MARCH 28, 2012. THE LIST BELOW  
 SUMMARIZES THE STRUCTURE OF THE FEDERATION UNDER THE REVISED AMENDMENTS.

BOARD OF TRUSTEES: AS UNDER THE EXISTING BYLAWS, THE FEDERATION WILL HAVE  
 A BOARD OF TRUSTEES. THE BOARD OF TRUSTEES WILL BE COMPRISED OF  
 INSTITUTIONAL TRUSTEES (FROM SPECIFIED AFFILIATE AGENCIES AND THE ATLANTA  
 RABBINICAL ASSOCIATION), UP TO FIFTY-FIVE TRUSTEES-AT-LARGE (ELECTED BY THE  
 MEMBERS), AND SPECIAL TRUSTEES (TRUSTEES FOR LIFE, EXECUTIVE COMMITTEE  
 MEMBERS, COMMITTEE CHAIRS AND VICE CHAIRS, AND UP TO TEN SPECIAL CHAIR  
 APPOINTEES). THE BOARD OF TRUSTEES WILL HAVE THE EXCLUSIVE AUTHORITY TO DO

THE FOLLOWING:

- ELECT AND REMOVE OFFICERS;
- ELECT AND REMOVE EXECUTIVE COMMITTEE MEMBERS;
- SET POLICIES REGARDING SERVICE ON THE BOARD OF TRUSTEES AND COMMITTEES;
- APPROVE FUTURE AMENDMENTS TO THE FEDERATION'S ARTICLES OF INCORPORATION  
AND BYLAWS; AND
- APPROVE THE FEDERATION'S BUDGET AND ALLOCATIONS OF FUNDS.

ALL OTHER POWERS FOR MANAGEMENT OF THE FEDERATION WILL BE DELEGATED BY THE  
 BOARD OF TRUSTEES TO THE EXECUTIVE COMMITTEE.

EXECUTIVE COMMITTEE: THE EXECUTIVE COMMITTEE WILL BE RESPONSIBLE FOR  
 GOVERNING THE FEDERATION ON A DAY-TO-DAY BASIS. THE EXECUTIVE COMMITTEE

Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number 58-1021791
---	--

WILL HAVE BETWEEN 11 AND 23 MEMBERS, AND THE FOLLOWING PEOPLE WILL

AUTOMATICALLY BE MEMBERS OF THE EXECUTIVE COMMITTEE: THE OFFICERS OF THE

FEDERATION (LISTED BELOW), THE TWO MOST RECENT PAST BOARD CHAIRS; THE

COMMUNITY CAMPAIGN CABINET CHAIR; THE WOMEN AND PHILANTHROPY CHAIR; THE

PLANNED GIVING AND ENDOWMENT COMMUNITY CHAIR; THE ALLOCATIONS/COMMUNITY

IMPACT COMMITTEE CHAIR; THE FIDUCIARY REVIEW COMMITTEE CHAIR; THE MARKETING

CHAIR; AND THE UNDER 40 CHAIR. THE BOARD OF TRUSTEES WILL ELECT THE

REMAINING EXECUTIVE COMMITTEE MEMBERS, BASED ON NOMINATIONS FROM THE

NOMINATING COMMITTEE.

OFFICERS: UNDER THE NEW BYLAWS, THE OFFICERS OF THE FEDERATION WILL BE:

THE CHAIR, VICE CHAIR, TREASURER, SECRETARY AND PRESIDENT/CEO. THE BOARD

OF TRUSTEES WILL ELECT THE OFFICERS, BASED ON NOMINATIONS FROM THE

NOMINATING COMMITTEE. THE PRESIDENT/CEO IS AN EMPLOYEE OF THE FEDERATION.

MEMBERS: AS UNDER THE EXISTING BYLAWS, MEMBERS WILL CONTINUE TO ELECT THE

BOARD OF TRUSTEES, BUT MEMBERS WILL NO LONGER ELECT THE OFFICERS OF THE

FEDERATION. ADDITIONALLY, MEMBERS WILL NO LONGER BE REQUIRED OR ASKED TO

APPROVE AMENDMENTS TO THE FEDERATION'S BYLAWS (OTHER THAN AS REQUIRED BY

LAW).

FORM 990, PART VI, SECTION A, LINE 6: ORGANIZATION IS ORGANIZED AS A

NOT-FOR-PROFIT ORGANIZATION WITH MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: ORGANIZATION HAS MEMBERS WHO ELECT

ONE OR MORE MEMBERS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE AUDIT

132212  
01-23-12

Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number 58-1021791
---	--

COMMITTEE. AFTER THE AUDIT COMMITTEE REVIEW, THE FORM 990 IS SENT TO THE ENTIRE BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: A CONFLICT OF INTEREST POLICY AND DISCLOSURE STATEMENT IS FURNISHED ANNUALLY TO EACH KEY INDIVIDUAL AND ANY NEW KEY INDIVIDUAL IS TO BE PROVIDED WITH A COPY OF THE POLICY UPON COMMENCEMENT OF HIS/HER POSITION. KEY INDIVIDUALS INCLUDE TRUSTEE, OFFICER, COMMITTEE MEMBER, AND/OR VOLUNTEER IN A POSITION TO INFLUENCE, PROVIDE INFORMATION WITH RESPECT TO, VOTE ON JFGA POLICY OR EXPENDITURES.

KEY INDIVIDUALS ARE REQUIRED TO DISCLOSE THAT THEY DO NOT HAVE ANY CONFLICT OF INTEREST THAT MAY BE SEEN AS COMPETING WITH INTERESTS OR CONCERNS OF JFGA, NOR DOES ANY MEMBER OF KEY INDIVIDUAL'S IMMEDIATE FAMILY OR ANY PARTY, GROUP, OR ORGANIZATION TO WHICH THEY HAVE AN ALLEGIANCE, OR COMPETING INTEREST OR CONCERN EXCEPT AS LISTED ON THE DISCLOSURE STATEMENT.

KEY INDIVIDUALS ARE REQUIRED TO PROMPTLY AND FULLY, BEFORE ANY DISCUSSION OR ACTION IS TAKEN ON THE MATTER, DISCLOSE THE CIRCUMSTANCES TO THE PRESIDENT OF THE JFGA OR TO THE CHAIR OF ANY COMMITTEE ON WHICH THEY SERVE.

IN THE EVENT A CONFLICT IS DISCLOSED EITHER IN WRITING OR ORALLY, THE CONTRACT OR TRANSACTION IS CONSIDERED PROPERLY AUTHORIZED, APPROVED OR RATIFIED ONLY IF THERE IS FAVORABLE VOTE OF A MAJORITY OF THE RELEVANT COMMITTEE OR BOARD.

FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS FOR DETERMINING THE COMPENSATION FOR THE PRESIDENT INCLUDES REVIEW AND APPROVAL BY THE COMPENSATION COMMITTEE EVERY THREE YEARS BASED UPON COMPARABILITY DATA FROM 990S OF OTHER ORGANIZATIONS AND COMPENSATION STUDY/SURVEYS. KEY EMPLOYEE COMPENSATION AND PERFORMANCE ARE REVIEWED BY THEIR SUPERVISOR.

COMPENSATION IS BASED ON COMPARABILITY DATA AND MEETING INTERNALLY

Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC.	Employer identification number 58-1021791
---	--

ESTABLISHED GOALS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS

AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:	-2,348,823.
---------------------------------------	-------------

PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION

COST	-996,514.
------	-----------

TOTAL TO FORM 990, PART XI, LINE 5	-3,345,337.
------------------------------------	-------------

FORM 990, PART XII, LINE 2B

THE AUDIT COMMITTEE HAS RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT

OF THE FEDERATION'S FINANCIAL STATEMENTS AND SELECTION OF AN

INDEPENDENT ACCOUNTANT.

**Related Organizations and Unrelated Partnerships**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Name of the organization **JEWISH FEDERATION OF GREATER ATLANTA, INC.** Employer identification number **58-1021791**

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

(a) Name, address, and EIN 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" to 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
ALEF FUND, INC. - 26-2919210 1440 SPRING STREET NW ATLANTA, GA 30309	SCHOLARSHIPS	GEORGIA	501(C)(3)	7			X
BILLI AND BERNIE MARCUS FOUNDATION, INC. - 58-1720888, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
BREMAN FOUNDATION, INC. - 58-6043553 1440 SPRING STREET NW ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
COHEN-KOGON CHARITABLE FUND, INC. - 58-1845797, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X

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



**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(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 organization?	
						Yes	No
DOUG AND ROBYN ROSS FAMILY FOUNDATION, INC. - 20-4337002, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE BEV AND MARC LEWYN SUPPORTING ORGANIZATION, INC. - 20-0748501, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE BLONDER FAMILY FOUNDATION, INC. - 58-2107339, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	PF1			X
THE FRIEDMAN SUPPORTING FOUNDATION, INC. - 58-1588277, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE HALPERN-OPPENHEIMER FAMILY FOUNDATION, INC. - 58-2512118, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE LEONARD AND JERRY GREENBAUM FAMILY FOUNDATION, INC. - 58-1927976, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE LYNNE AND HOWARD HALPERN FAMILY FOUNDATION, INC. - 58-2502288, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	PF1			X
THE MIDDLE J FOUNDATION, INC - 20-2073503 1440 SPRING STREET NW ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE PATTY REID HERTZ SUPPORTING FAMILY FOUNDATION - 20-3831519, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
THE R. PETER AND BARBARA FISHMAN SUPPORTING FOUNDATION, INC. - 58-2509524, 1440 SPRING STREET NW, ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X
WEINSTEIN FOUNDATION, INC. - 58-1376003 1440 SPRING STREET NW ATLANTA, GA 30309	SUPPORTING ORG	GEORGIA	501(C)(3)	11A			X

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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) Disproportion- ate 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" to 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

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

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

**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?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	X	
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Sale of assets to related organization(s) .....		X
<b>g</b> Purchase of assets from related organization(s) .....		X
<b>h</b> Exchange of assets with related organization(s) .....		X
<b>i</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>k</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>l</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>n</b> Sharing of paid employees with related organization(s) .....	X	
<b>o</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>p</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>q</b> Other transfer of cash or property to related organization(s) .....		X
<b>r</b> Other transfer of cash or property from related organization(s) .....		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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) BREMAN FOUNDATION, INC.	C	359,930.	
(2) COHEN-KOGON CHARITABLE FUND, INC.	C	570,917.	
(3) THE BLONDER FAMILY FOUNDATION, INC.	C	296,150.	
(4) THE FRIEDMAN SUPPORTING FOUNDATION, INC.	C	649,920.	
(5) THE HALPERN-OPPENHEIMER FAMILY FOUNDATION, INC.	C	398,500.	
(6) THE LEONARD AND JERRY GREENBAUM FAMILY FOUNDATION, INC.	C	351,800.	

**Part V** Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) THE MIDDLE J FOUNDATION, INC.	C	83,500.	
(8) WEINSTEIN FOUNDATION, INC.	C	198,000.	
(9) ALEF FUND, INC.	K	133,340.	
(10) ALEF FUND, INC.	P	79,870.	
(11) DOUG AND ROBYN ROSS FAMILY FOUNDATION, INC.	C	102,100.	
(12) THE BEV AND MARC LEWYN SUPPORTING ORGANIZATION, INC.	D	79,842.	
(13) THE PATTY REID HERTZ SUPPORTING FAMILY FOUNDATION	C	3,500.	
(14) BILLI AND BERNIE MARCUS FOUNDATION, INC.	C	57,123.	
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

**Part VI Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate 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		Yes	No	

**Part VII Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Multiple horizontal lines for supplemental information.