

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)

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning SEP 1, 2010 and ending AUG 31, 2011

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
THE JEWISH FEDERATION OF GREATER ORLANDO
 Doing Business As
 Number and street (or P O box if mail is not delivered to street address) Room/suite
851 N. MAITLAND AVENUE
 City or town, state or country, and ZIP + 4
MAITLAND, FL 32794-1508

D Employer identification number
59-0946923

E Telephone number
407-645-5933

F Name and address of principal officer: IAN ROBINSON
SAME AS C ABOVE

G Gross receipts \$ **2,089,793.**

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527

J Website: **WWW.JFGO.ORG**

K Form of organization Corporation Trust Association Other

L Year of formation **1947** **M State of legal domicile** **FL**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE JEWISH FEDERATION IS THE PORTAL TO JEWISH LIFE IN CENTRAL FLORIDA. WE CONNECT MEMBERS OF OUR		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	15
	6	Total number of volunteers (estimate if necessary)	6	100
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,507,492.	1,055,386.
	9	Program service revenue (Part VIII, line 2g)	787,864.	782,260.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	112,285.	113,464.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<44,622.>	73,603.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,363,019.	2,024,713.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	259,914.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	637,899.	411,911.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25)	342,701.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,787,657.	1,757,739.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,685,470.	2,339,011.	
19	Revenue less expenses. Subtract line 18 from line 12	677,549.	<314,298.>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	20,069,224.	19,497,978.
	21	Total liabilities (Part X, line 26)	7,016,937.	6,661,374.
	22	Net assets or fund balances. Subtract line 21 from line 20	13,052,287.	12,836,604.

Part II Signature Block

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

Sign Here

Signature of officer: *[Signature]* Date: **2/15/12**

IAN ROBINSON, PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **ANNE-MARIE BARRETT, CPA** Preparer's signature: *[Signature]* Date: **2-10-11** Check if self-employed: PTIN: _____

Firm's name: **CROSS, FERNANDEZ & RILEY, LLP** Firm's EIN: _____

Firm's address: **201 S. ORANGE AVE., SUITE 800 ORLANDO, FL 32801-3421** Phone no: **(407)841-6930**

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

SCANNED MAR 7 6 2012

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17

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: TO NURTURE A UNIFIED JEWISH COMMUNITY THAT TRANSCENDS GENERATIONS AND NEIGHBORHOODS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? X Yes No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services 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 \$ 512,062. including grants of \$ 169,361.) (Revenue \$) CONNECTING MEMBERS OF OUR COMMUNITY BY SUPPORTING AND FUNDING OUTREACH AND SOCIAL SERVICES, BOTH LOCALLY AND IN ISRAEL.

4b (Code:) (Expenses \$ 62,811. including grants of \$) (Revenue \$ 78,831.) BEIT HAMIDRASH - OUR SUCCESSFUL COMMUNITY HEBREW HIGH SCHOOL PROGRAM FOR TEENS IN GRADES 8 THROUGH 12 IS AN IMPORTANT INITIATIVE INSTILLING A LIFELONG LOVE OF JEWISH LEARNING. THIS INVALUABLE 24 WEEK PROGRAM PROVIDES 200 JEWISH TEENS WITH A UNIQUE OPPORTUNITY TO LEARN THEIR HISTORY, TRADITIONS AND VALUES WHILE BUILDING FRIENDSHIPS WITH OTHER JEWISH TEENS AND STRENGTHENING THEIR JEWISH IDENTITY.

4c (Code:) (Expenses \$ 18,921. including grants of \$) (Revenue \$ 14,163.) OR HADASH - AS THE ONLY GROUP IN CENTRAL FLORIDA THAT REACHES OUT TO OVER 2000 YOUNG JEWISH PROFESSIONALS THROUGH SOCIAL, PHILANTHROPIC AND EDUCATIONAL ACTIVITIES, OR HADASH IS WHERE ORLANDO'S JEWISH 20 AND 30-SOMETHINGS COME TOGETHER SPIRITUALLY - AND SOCIALLY. MOST OF THE PARTICIPANTS ARE NEW TO ORLANDO OR ARE JUST GETTING RECONNECTED AFTER COLLEGE AND OR HADASH IS THEIR MAIN PORTAL INTO A CONNECTED AND VIBRANT JEWISH LIFE.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 794,158. including grants of \$) (Revenue \$ 805,798.)

4e Total program service expenses 1,387,952.

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 Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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 term, permanent, 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, and program service activities outside the United States? <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 hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 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? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	X	
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 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? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete 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
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official	X	
15b	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.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make 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 makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **DAWN PHELPS - 407-645-5933**
851 N. MAITLAND AVENUE, MAITLAND, FL 32751

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 (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			
PAT BORNSTEIN DIRECTOR AT-LARGE	1.00	X					0.	0.	0.	
NEAL CRASNOW PARLIAMENTARIAN	1.00	X					0.	0.	0.	
MICHAEL SOLL VICE PRESIDENET & TREASURER	1.00	X		X			0.	0.	0.	
HOPE KRAMER EXECUTIVE DIRECTOR (NON-VOTING)	45.00	X		X			104,250.	0.	300.	
JODI KRINKER SECRETARY	1.00	X		X			0.	0.	0.	
RENE BRENT DIRECTOR AT-LARGE	1.00	X					0.	0.	0.	
SAM KAUFFMAN CO-CHAIR ISRAEL/INTERNATIONAL JEWRY	1.00	X					0.	0.	0.	
BRIAN MARGOLIS NON-VOTING BOARD MEMBER	1.00	X					0.	0.	0.	
MARILYN MARKS BOARD DEVELOPMENT CHAIR	1.00	X					0.	0.	0.	
BETSY JACOBS DIRECTOR AT-LARGE	1.00	X					0.	0.	0.	
AVA MAXWELL CO-CHAIR ISRAEL/INTERNATIONAL JEWRY	1.00	X					0.	0.	0.	
ROGER JACOBSON DIRECTOR AT-LARGE	1.00	X					0.	0.	0.	
IAN ROBINSON PRESIDENT	1.00	X		X			0.	0.	0.	
ADAM SCHEINBERG DIRECTOR AT-LARGE	1.00	X					0.	0.	0.	
PHILIP SENDEROWITZ TOP TRUSTEE	1.00	X					0.	0.	0.	
RABBI AARON RUBINGER GOBOR	1.00	X					0.	0.	0.	
RYAN LEFKOWITZ DIRECTOR AT-LARGE	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 (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			
FAYE NOVICK DIRECTOR AT-LARGE	1.00	X						0.	0.	0.
BARBARA WEINREICH CHAIR COMMUNITY RELATIONS COMMITTEE	1.00	X						0.	0.	0.
LYNNE SHEFSKY NON-VOTING REPRESENTATIVE	1.00	X						0.	0.	0.
PAM KANCHER NON-VOTING REPRESENTATIVE	1.00	X						0.	0.	0.
DAVID WAYNE NON-VOTING REPRESENTATIVE	1.00	X						0.	0.	0.
BARRY KUDLOWITZ NON-VOTING REPRESENTATIVE	1.00	X						0.	0.	0.
NANCY LUDIN NON-VOTING REPRESENTATIVE	1.00	X						0.	0.	0.
LESLIE COLLIN NON-VOTING REPRESENTATIVE	1.00	X						0.	0.	0.
AARON SWIREN DIRECTOR AT-LARGE	1.00	X						0.	0.	0.
1b Sub-total								104,250.	0.	300.
c Total from continuation sheets to Part VII, Section A								80,465.	0.	0.
d Total (add lines 1b and 1c)								184,715.	0.	300.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

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	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	61,909.					
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above	1f	993,477.					
	g Noncash contributions included in lines 1a-1f \$		32,840.					
h Total. Add lines 1a-1f			1055386.					
Program Service Revenue	2 a FACILITY RENTAL	Business Code	532000	695,605.	695,605.			
	b TUITION REVENUE		611710	45,475.	45,475.			
	c PROGRAM FEES		611710	41,180.	41,180.			
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			782,260.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			113,464.			113,464.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross Rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		b Less: cost or other basis and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 61,909. of contributions reported on line 1c). See Part IV, line 18	a		22,151.				
b Less: direct expenses			65,080.					
c Net income or (loss) from fundraising events				<42,929.>			<42,929.>	
9 a Gross income from gaming activities. See Part IV, line 19	a							
	b Less: direct expenses							
	c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a							
	b Less: cost of goods sold							
	c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a UJC PAYABLE WRITE-OFF			900099	60,618.	60,618.			
	b BAD DEBT EXPENSE		900099	40,314.	40,314.			
	c MISCELLANEOUS INCOME		900099	15,600.	15,600.			
	d All other revenue							
e Total. Add lines 11a-11d				116,532.				
12 Total revenue. See instructions				2024713.	898,792.	0.	70,535.	

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).

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 U.S. See Part IV, line 21	169,361.	169,361.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	179,103.	35,821.	20,500.	122,782.
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	174,855.	97,045.	31,496.	46,314.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	28,132.	8,851.	5,559.	13,722.
10 Payroll taxes	29,821.	11,432.	4,406.	13,983.
11 Fees for services (non-employees)				
a Management				
b Legal	39.		39.	
c Accounting	102,700.		102,700.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	68,597.		68,597.	
g Other	176,339.	127,475.	40,796.	8,068.
12 Advertising and promotion	30,909.	7,040.	1,249.	22,620.
13 Office expenses	18,905.	6,463.	12,401.	41.
14 Information technology	16,440.		16,440.	
15 Royalties				
16 Occupancy	20,843.	7,932.	12,911.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,956.	3,896.	3,455.	605.
20 Interest	198,174.		198,174.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	648,941.	632,717.	16,224.	
23 Insurance	25,552.	9,163.	16,389.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a FACILITY MANAGEMENT	178,534.	178,534.		
b PROGRAMS AND EVENTS	170,874.	81,891.	328.	88,655.
c PRINTING & POSTAGE	29,978.	386.	5,059.	24,533.
d				
e				
f All other expenses	62,958.	9,945.	51,635.	1,378.
25 Total functional expenses. Add lines 1 through 24f	2,339,011.	1,387,952.	608,358.	342,701.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	112,529.	2	184,365.
	3 Pledges and grants receivable, net	1,141,913.	3	1,087,812.
	4 Accounts receivable, net	152,880.	4	82,795.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5
	6 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)			6
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	11,063.	9	53,308.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 23,466,819.		
	b Less: accumulated depreciation	10b 7,239,320.	10c	16,227,499.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	1,577,899.	12	1,645,711.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	230,781.	15	216,488.
16 Total assets. Add lines 1 through 15 (must equal line 34)	20,069,224.	16	19,497,978.	
Liabilities	17 Accounts payable and accrued expenses	88,325.	17	81,649.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	4,405,000.	20	4,240,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	367,700.	24	367,700.
	25 Other liabilities. Complete Part X of Schedule D	2,155,912.	25	1,972,025.
	26 Total liabilities. Add lines 17 through 25	7,016,937.	26	6,661,374.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	13,001,672.	27	12,744,699.
	28 Temporarily restricted net assets	50,615.	28	91,905.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	13,052,287.	33	12,836,604.
34 Total liabilities and net assets/fund balances	20,069,224.	34	19,497,978.	

Form 990 (2010)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,024,713.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,339,011.
3	Revenue less expenses. Subtract line 2 from line 1	3	<314,298.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,052,287.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	98,615.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	12,836,604.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2010)

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,106,261.	5,143,733.	2,943,153.	2,507,492.	1,055,386.	14,756,025.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,106,261.	5,143,733.	2,943,153.	2,507,492.	1,055,386.	14,756,025.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,301,142.
6 Public support. Subtract line 5 from line 4						13,454,883.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	3,106,261.	5,143,733.	2,943,153.	2,507,492.	1,055,386.	14,756,025.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	35,415.	124,454.	58,753.	112,643.	113,464.	444,729.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	48,523.	5,839.	5,188.	1,707.	116,532.	177,789.
11 Total support. Add lines 7 through 10						15,378,543.
12 Gross receipts from related activities, etc. (see instructions)					12	5,474,916.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	87.49 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	85.00 %
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. 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 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, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

THE JEWISH FEDERATION OF GREATER ORLANDO

Employer identification number

59-0946923

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
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input 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 |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, 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:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ _____ %
- c Term endowment ▶ _____ %

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)		
3a(ii)		
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 investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,703,486.		2,703,486.
b Buildings		17,751,850.	5,374,231.	12,377,619.
c Leasehold improvements		1,997,597.	1,328,047.	669,550.
d Equipment		990,757.	537,042.	453,715.
e Other		23,129.		23,129.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				16,227,499.

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) INVESTMENTS HELD BY TOP		
(B) JEWISH FOUNDATION	989,255.	END-OF-YEAR MARKET VALUE
(C) ISRAEL BOND	1,000.	COST
(D) INTEREST IN NET ASSETS OF		
(E) TOP JEWISH FOUNDATION	655,456.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	1,645,711.	

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)		
Total. (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)	
Total. (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) Amount
(1) Federal income taxes	
(2) ALLOCATIONS PAYABLE	245,273.
(3) INTEREST RATE SWAP LIABILITY	856,752.
(4) TAXABLE BOND	870,000.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	1,972,025.

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)	2,024,713.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2,339,011.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	<314,298.>
4	Net unrealized gains (losses) on investments	53,234.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	45,381.
9	Total adjustments (net). Add lines 4 through 8	98,615.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<215,683.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	2,089,784.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	53,234.
b	Donated services and use of facilities	6,770.
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV.)	45,381.
e	Add lines 2a through 2d	105,385.
3	Subtract line 2e from line 1	1,984,399.
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	40,314.
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	40,314.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	2,024,713.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	2,305,467.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	6,770.
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIV.)	<40,314.>
e	Add lines 2a through 2d	<33,544.>
3	Subtract line 2e from line 1	2,339,011.
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	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	2,339,011.

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: THE FEDERATION FOLLOWS ACCOUNTING STANDARDS

CODIFICATION (ASC) 740, "INCOME TAXES," WHICH PROVIDES GUIDANCE ON THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE FEDERATION HAS NO UNCERTAIN TAX POSITIONS THAT REQUIRE EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. IF THERE WERE AN UNRECOGNIZED TAX BENEFIT, THE FEDERATION WOULD RECOGNIZE INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES.

Part XIV Supplemental Information (continued)

PART XI, LINE 8 - OTHER ADJUSTMENTS:

INCREASE IN VALUE OF INTEREST SWAP 45,381.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INCREASE IN VALUE OF INTEREST RATE SWAP 45,381.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE 40,314.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE -40,314.

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

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		CHOICES 2011 (event type)	(event type)	(total number)	
Revenue	1	Gross receipts	84,060.		84,060.
	2	Less: Charitable contributions	61,909.		61,909.
	3	Gross income (line 1 minus line 2)	22,151.		22,151.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes	2,100.		2,100.
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	62,980.		62,980.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			(65,080.)
11	Net income summary. Combine line 3, column (d), and line 10			<42,929.>	

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

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

**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

2010

Open to Public
Inspection

Name of the organization

THE JEWISH FEDERATION OF GREATER ORLANDO

Employer identification number
59-0946923

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 ▶

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY CENTER 851 N. MAITLAND AVE. MAITLAND, FL 32751	23-748234	501(C)(3)	95,000.	0.			TO SUPPORT OPENING OF 2ND LOCATION - UNRESTRICTED ASSISTANCE FOR OPERATIONS.
JEWISH FAMILY SERVICES 2100 LEE ROAD WINTER PARK, FL 32789	59-1873758	501(C)(3)	20,000.	0.			TO SUPPORT THEIR CHAPLAINCY PROGRAM
JEWISH FEDERATIONS OF NORTH AMERICA - 25 BROADWAY # 1700 - NEW YORK, NY 10004	13-1624240	501(C)(3)	45,862.	0.			UNRESTRICTED ALLOCATION

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

▶ 3 ▶

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

Schedule I (Form 990) (2010)

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

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

SCHEDULE I, PART I, LINE 2: AGENCIES APPLY FOR ANNUAL ALLOCATION FUNDING FROM THE FEDERATION. THE FEDERATION'S ALLOCATION COMMITTEE REVIEWS THE AMOUNT OF FUNDS RAISED IN THE PRIOR CAMPAIGN YEAR AND ALLOCATES TO THE AGENCIES BASED ON THEIR APPLICATION AND NEED. ONCE AN ALLOCATION IS AWARDED, IT IS PAID THROUGH OUT THE NEXT FISCAL YEAR. USE OF THE FUNDS BY THE RECEIVING AGENCY IS NOT MONITORED BY THE FEDERATION.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

THE JEWISH FEDERATION OF GREATER ORLANDO

Employer identification number
59-0946923

Part I. Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
ORANGE COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY	59-1767933684908AG1		01/29/03	5390000	CAPITAL EXPANSION		X		X		X
B											
C											
D											

Part II. Proceeds

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

Part III. Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b Are there any research agreements that may result in private business use of bond-financed property?		X						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								%
6 Total of lines 4 and 5								%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2 Is the bond issue a variable rate issue?		X						
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider								
c Term of hedge								
d Was the hedge superintergrated?		X						
e Was the hedge terminated?		X						
4a Were gross proceeds invested in a GIC?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?		X						

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

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
BRIAN MARGOLIS (OWNER OF CNON-VOTING BOARD ME		21,175.	CONTRACT MA		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 INTERESTED PERSON:

BRIAN MARGOLIS (OWNER OF CRANK COMMUNICATIONS)

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

NON-VOTING BOARD MEMBER

(D) DESCRIPTION OF TRANSACTION: CONTRACT MARKETING AND GRAPHIC DESIGN

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2010

**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 **THE JEWISH FEDERATION OF GREATER ORLANDO** Employer identification number **59-0946923**

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			
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	X	3	32,840. PROPERTY TAX VALUE
16	Real estate - Commercial			
17	Real estate - Other			
18	Collectibles			
19	Food inventory			
20	Drugs and medical supplies			
21	Taxidermy			
22	Historical artifacts			
23	Scientific specimens			
24	Archeological artifacts			
25	Other ▶ (_____)			
26	Other ▶ (_____)			
27	Other ▶ (_____)			
28	Other ▶ (_____)			

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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? b If "Yes," describe the arrangement in Part II.		X
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? b If "Yes," describe in Part II.		X
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) (2010)

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

2010
Open to Public
Inspection

Name of the organization

THE JEWISH FEDERATION OF GREATER ORLANDO

Employer identification number
59-0946923

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

COMMUNITY BY SUPPORTING AND FUNDING OUTREACH, SOCIAL SERVICES AND
SUPPORT FOR ISRAEL. WE PARTNER WITH WELL-ESTABLISHED AGENCIES IN THE
JEWISH COMMUNITY, BUT WE'RE ALSO COMMITTED TO FUNDING NEW, INNOVATIVE
INITIATIVES TO STRENGTHEN JEWISH LIFE IN CENTRAL FLORIDA. OUR MISSION
IS TO NURTURE A UNIFIED JEWISH COMMUNITY THAT TRANSCENDS GENERATIONS
AND NEIGHBORHOODS. OUR VISION IS TO ENGAGE JEWISH PEOPLE OF ALL AGES IN
RELEVANT, MEANINGFUL WAYS THAT UNITE OUR COMMUNITY, ENHANCE JEWISH LIFE
AND BUILD CULTURAL CONTINUITY FROM ONE GENERATION TO THE NEXT.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

PJ LIBRARY - THIS IS A JEWISH FAMILY ENGAGEMENT PROGRAM THAT
MAILS FREE, HIGH-QUALITY JEWISH CHILDREN'S LITERATURE AND MUSIC TO
FAMILIES WITHIN OUR COMMUNITY ON A MONTHLY BASIS. THE PROGRAM IS OPEN
TO FAMILIES WITH CHILDREN AGES 6 MONTHS TO 6 YEARS. WE CURRENTLY SERVE
280 FAMILIES.

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

PJ LIBRARY - THIS IS A JEWISH FAMILY ENGAGEMENT PROGRAM THAT
MAILS FREE, HIGH-QUALITY JEWISH CHILDREN'S LITERATURE AND MUSIC TO
FAMILIES WITHIN OUR COMMUNITY ON A MONTHLY BASIS. THE PROGRAM IS OPEN
TO FAMILIES WITH CHILDREN AGES 6 MONTHS TO 6 YEARS. WE CURRENTLY SERVE
280 FAMILIES.

EXPENSES \$ 794,158. INCLUDING GRANTS OF \$ 0. REVENUE \$ 805,798.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE RETURN IS SENT TO ALL

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

Schedule O (Form 990 or 990-EZ) (2010)

032211
01-24-11

Name of the organization

THE JEWISH FEDERATION OF GREATER ORLANDO

Employer identification number

59-0946923

BOARD MEMBERS FOR REVIEW PRIOR TO FILING. THE FINANCE COMMITTEE, DIRECTOR OF FINANCE AND THE CEO ALSO REVIEW THE RETURN AND ARE RESPONSIBLE FOR APPROVING IT BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C: THE FINANCE COMMITTEE REVIEWS THE BOARD OF DIRECTOR'S SIGNED CONFLICT OF INTEREST CONTRACTS ANNUALLY AND IS RESPONSIBLE FOR BRINGING ANY POSSIBLE CONFLICTS TO THE ATTENTION OF THE EXECUTIVE COMMITTEE FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE AND IS REVIEWED ANNUALLY. THE EXECUTIVE COMMITTEE PARTICIPATES IN AND UTILIZES THE ANNUAL ROLLINS COLLEGE PHILANTHROPY CENTER'S NOT FOR PROFIT'S COMPENSATION SURVEY AS REFERENCE FOR ALL KEY EMPLOYEE'S COMPENSATION. THE EXECUTIVE DIRECTOR PROVIDES THE ANNUAL REVIEW FOR THE KEY EMPLOYEES, SUCH AS THE DIRECTOR OF FINANCE AND THE DIRECTOR OF DEVELOPMENT.

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST. ALSO THE ANNUAL MEETING IS OPEN TO THE PUBLIC, NOT JUST BOARD MEMBERS AND AT THE ANNUAL MEETING IT IS ANNOUNCED OR PRINTED IN THE PROGRAMS THAT FINANCIALS, 990'S AND POLICIES ARE AVAILABLE UPON REQUEST.

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

NET UNREALIZED GAINS ON INVESTMENTS:	53,234.
INCREASE IN VALUE OF INTEREST SWAP	45,381.
TOTAL TO FORM 990, PART XI, LINE 5	98,615.

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

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

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

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

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

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

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

Type or print	Name of exempt organization THE JEWISH FEDERATION OF GREATER ORLANDO	Employer identification number 59-0946923
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 851 N. MAITLAND AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MAITLAND, FL 32794-1508	

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

01

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

DAWN PHELPS

- The books are in the care of ▶ **851 N. MAITLAND AVENUE - MAITLAND, FL 32751**
 Telephone No. ▶ **407-645-5933** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **APRIL 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **SEP 1, 2010**, and ending **AUG 31, 2011**

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

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

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.
 LHA For Paperwork Reduction Act Notice, see Instructions. Form **8868** (Rev. 1-2011)