

**2008 TAX RETURN**

**CLIENT COPY**

**Client:** 343450

**Prepared for:** JEWISH WORLD WATCH  
17514 VENTURA BLVD. SUITE 206  
ENCINO, CA 91316  
818 501-1836

**Prepared by:** RICHARD MANDELSON  
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15910 VENTURA BLVD., STE. 1100  
ENCINO, CA 91436-2869  
(818) 907-6500

**Date:** SEPTEMBER 15, 2009

**Comments:**

**DRAFT**

**Route to:** \_\_\_\_\_

12/31/08

## 2008 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 1

JEWISH WORLD WATCH

20-3406211

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
FURNITURE AND FIXTURES																
12	FURNITURE	4/10/08		2,320							2,320		S/L	5		348
	TOTAL FURNITURE AND FIXTURE			2,320		0	0	0	0	0	2,320	0				348
MACHINERY AND EQUIPMENT																
1	EPSON DESKTOP PROJECTOR	2/27/06		1,869							1,869	778	S/L	5		374
2	COMPUTER	5/30/06		1,678							1,678	672	S/L	5		336
3	COMPUTER	12/11/06		1,101							1,101	440	S/L	5		220
4	COMPUTER	4/20/07		1,088							1,088	145	S/L	5		218
5	COMPUTER	7/06/07		769							769	77	S/L	5		154
6	COMPUTER	7/06/07		1,369							1,369	137	S/L	5		274
7	COMPUTER	12/20/07		1,100							1,100		S/L	5		220
8	COMPUTER	12/20/07		760							760		S/L	5		152
9	COMPUTER	12/20/07		310							310		S/L	5		62
10	COMPUTER	3/06/08		1,808							1,808		S/L	5		301
11	SOFTWARE	3/07/08		3,521							3,521		S/L	5		587
13	COMPUTER	10/10/08		1,025							1,025		S/L	5		51
14	COMPUTER	10/24/08		3,257							3,257		S/L	5		109
15	SERVER	10/31/08		3,357							3,357		S/L	5		112
	TOTAL MACHINERY AND EQUIPME			23,012		0	0	0	0	0	23,012	2,249				3,170
	TOTAL DEPRECIATION			25,332		0	0	0	0	0	25,332	2,249				3,518

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12/31/08

## 2008 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 2

JEWISH WORLD WATCH

20-3406211

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	GRAND TOTAL DEPRECIATION			<u>25,332</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>25,332</u>	<u>2,249</u>				<u>3,518</u>

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12/31/08

## 2008 CALIFORNIA BOOK DEPRECIATION SCHEDULE

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FORM 199																
FURNITURE AND FIXTURES																
12	FURNITURE	4/10/08		2,320							2,320		S/L	5		348
	TOTAL FURNITURE AND FIXTURE			2,320		0	0	0	0	0	2,320	0				348
MACHINERY AND EQUIPMENT																
1	EPSON DESKTOP PROJECTOR	2/27/06		1,869							1,869	778	S/L	5		374
2	COMPUTER	5/30/06		1,678							1,678	672	S/L	5		336
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7	COMPUTER	12/20/07		1,100							1,100		S/L	5		220
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14	COMPUTER	10/24/08		3,257							3,257		S/L	5		109
15	SERVER	10/31/08		3,357							3,357		S/L	5		112
	TOTAL MACHINERY AND EQUIPME			23,012		0	0	0	0	0	23,012	2,249				3,170
	TOTAL DEPRECIATION			25,332		0	0	0	0	0	25,332	2,249				3,518

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	GRAND TOTAL DEPRECIATION			<u>25,332</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>25,332</u>	<u>2,249</u>				<u>3,518</u>

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**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)**2008**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****For the 2008 calendar year, or tax year beginning , 2008, and ending ,**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>Please use IRS label or print or type. See specific instructions.</b> <b>JEWISH WORLD WATCH</b> <b>17514 VENTURA BLVD. #206</b> <b>ENCINO, CA 91316</b>	<b>D Employer Identification Number</b> <b>20-3406211</b> <b>E Telephone number</b> <b>818 501-1836</b> <b>G Gross receipts \$</b> <b>1,956,494.</b>	<b>F Name and address of principal officer:</b> <b>SAME AS C ABOVE</b> <b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) ▶ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>J Website: ▶</b> <b>WWW.JEWISHWORLDDWATCH.ORG</b>	
<b>K Type of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L Year of Formation:</b> <b>2005</b> <b>M State of legal domicile:</b> <b>CA</b>	

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>JEWISH WORLD WATCH WORKS TO MOBILIZE SYNAGOGUES AND THE COMMUNITY TO COMBAT GENOCIDE AND OTHER ATROCITIES WORLDWIDE THROUGH EDUCATION, ADVOCACY AND REFUGEE RELIEF.</u>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> ..... <b>17</b> <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> ..... <b>17</b> <b>5</b> Total number of employees (Part V, line 2a) ..... <b>5</b> ..... <b>6</b> <b>6</b> Total number of volunteers (estimate if necessary) ..... <b>6</b> ..... <b>400</b> <b>7a</b> Total gross unrelated business revenue from Part VIII, line 12, column (C) ..... <b>7a</b> ..... <b>0.</b> <b>7b</b> Net unrelated business taxable income from Form 990-T, line 34 ..... <b>7b</b> ..... <b>0.</b>		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) ..... <b>2,238,404.</b> <b>9</b> Program service revenue (Part VIII, line 2g) ..... <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>23,245.</b> <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>12</b> Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>2,261,649.</b>	<b>Prior Year</b>	<b>Current Year</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... <b>805,078.</b> <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>201,970.</b> <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>135,039.</b> <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) ..... <b>541,814.</b> <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>1,548,862.</b> <b>19</b> Revenue less expenses. Subtract line 18 from line 12 ..... <b>712,787.</b>	<b>2,261,649.</b>	<b>1,956,494.</b>
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) ..... <b>1,236,933.</b> <b>21</b> Total liabilities (Part X, line 26) ..... <b>66,686.</b> <b>22</b> Net assets or fund balances. Subtract line 21 from line 20 ..... <b>1,170,247.</b>	<b>Beginning of Year</b>	<b>End of Year</b>
		<b>1,236,933.</b>	<b>1,996,890.</b>
		<b>66,686.</b>	<b>249,127.</b>
		<b>1,170,247.</b>	<b>1,747,763.</b>

**Part II Signature Block**

<b>Sign Here</b>	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. ▶ _____ Signature of officer	Date	
	▶ _____ Type or print name and title.		
<b>Paid Preparer's Use Only</b>	Preparer's signature ▶ _____ Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ <b>KIRSCH, KOHN &amp; BRIDGE, LLP</b> <b>15910 VENTURA BLVD., STE. 1100</b> <b>ENCINO, CA 91436-2869</b>	Date Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) <b>N/A</b> EIN ▶ <b>N/A</b> Phone no. ▶ <b>(818) 907-6500</b>	

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

**Part III** Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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

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

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

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

4 Describe the 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 \$ 743,719. including grants of \$ 476,630. ) (Revenue \$ 1,248,199. )

SEE SCHEDULE O

4b (Code: ) (Expenses \$ 92,342. including grants of \$ ) (Revenue \$ 66,923. )

SEE SCHEDULE O

4c (Code: ) (Expenses \$ 41,347. including grants of \$ ) (Revenue \$ 52,140. )

ADVOCACY: ON SOME RARE OCCASIONS, CHANGING THE LAW OF THE LAND IS ONE ADVOCACY STRATEGY THAT IS USED TO TARGET SPECIFIC ISSUES WITHIN A LARGER POLICY CONVERSATION. JWW RALLIES ITS CONSTITUENTS TO MAKE IT CLEAR TO LEGISLATORS THAT ENDING THE GENOCIDE IN DARFUR AND BRINGING PEACE TO SUDAN IS A DOMESTIC POLITICAL ISSUE THAT CANNOT BE IGNORED.

4d Other program services. (Describe in Schedule O.) SEE SCHEDULE O

(Expenses \$ 276,258. including grants of \$ ) (Revenue \$ 566,527. )

4e Total program service expenses ► \$ 1,153,666. (Must equal Part IX, Line 25, column (B).)

**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)? If 'Yes,' complete Schedule A .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III .....	<input type="checkbox"/>	<input type="checkbox"/>
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? If 'Yes,' complete Schedule D, Part IV .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the U.S.? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? If 'Yes,' complete Schedule F, Part II .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? If 'Yes,' complete Schedule F, Part III .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25 .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<input type="checkbox"/>	<input type="checkbox"/>
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? .....	<input type="checkbox"/>	<input type="checkbox"/>
25a <b>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? If 'Yes,' complete Schedule L, Part I .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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 .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Form 990 (2008)

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

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b> Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV.</i>	<b>28a</b>	X
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV.</i>	<b>28b</b>	X
<b>c</b> Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If 'Yes,' complete Schedule L, Part IV.</i>	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	<b>29</b>	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>	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	<b>31</b>	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>	<b>32</b>	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>	<b>33</b>	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>	<b>34</b>	X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	<b>35</b>	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>	<b>36</b>	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>	<b>37</b>	X

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Form 990 (2008)

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable. . . . .	1a	22
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. . . . .	1b	0
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	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. . . . .	2a	6
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .	2b	X
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a	X
<b>3b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O. . . . .	3b	
<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)? . . . . .	4a	X
<b>4b</b>	If 'Yes,' enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , 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? . . . . .	5a	X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b	X
<b>5c</b>	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	5c	
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible? . . . . .	6a	X
<b>6b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? . . . . .	6b	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? . . . . .	7a	X
<b>7b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided? . . . . .	7b	
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c	X
<b>7d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year. . . . .	7d	
<b>7e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e	X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f	X
<b>7g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g	X
<b>7h</b>	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7h	X
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8	
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966? . . . . .	9a	
<b>9b</b>	Did the organization make any distribution to a donor, donor advisor, or related person? . . . . .	9b	
<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 . . . . .	10a	
<b>10b</b>	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . .	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from other members or shareholders . . . . .	11a	
<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.) . . . . .	11b	
<b>12a</b>	<b>Section 4947(a)(1) nonexempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	
<b>12b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. . . . .	12b	

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Form 990 (2008)

**Part VI Governance, Management and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

		Yes	No
For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	17	
1b	Enter the number of voting members that are independent	17	
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 organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material 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:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?		X
9b	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?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . SEE. SCHEDULE O . . .	X	
11	Is there any officer, director or 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**

		Yes	No
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. . . . SEE. SCHEDULE O . . .	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:		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers of key employees of the organization? . . SEE. SCHEDULE O . . . Describe the process in Schedule O. (see instructions)	X	
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. Disclosures**

17 List the states with which a copy of this Form 990 is required to be filed ► CA

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. SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► TZIVIA SCHWARTZ-GETZUG 17514 VENTURA BLVD., STE 206 ENCINO CA 91316 818 501-1836

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Form 990 (2008)

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors****Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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 the organization did not compensate any officer, director, trustee, or key employee.

(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			
JANICE KAMENIR REZNIK PRESIDENT	25	X		X				0.	0.	0.
MARCY RAINEY TREASURER	5	X		X				0.	0.	0.
RABBI HAROLD M. SCHULWEIS CHAIRMAN	5	X						0.	0.	0.
HONEY AMADO DIRECTOR	1	X						0.	0.	0.
JULIE BRAM DIRECTOR	1	X						0.	0.	0.
STUART GABRIEL DIRECTOR	1	X						0.	0.	0.
SHEILA GORDON WASSERMAN DIRECTOR	5	X						0.	0.	0.
DIANE KABAT DIRECTOR	1	X						0.	0.	0.
PAM KAIZER SECRETARY	1	X		X				0.	0.	0.
RABBI YOSEF KANEFSKY DIRECTOR	1	X						0.	0.	0.
RABBI ALAN LACHTMAN DIRECTOR	1	X						0.	0.	0.
SHELBY LAYNE DIRECTOR	1	X						0.	0.	0.
RABBI JOSHUA LEVINE-GRATER DIRECTOR	1	X						0.	0.	0.
PETER MARCUS VICE PRESIDENT	1	X		X				0.	0.	0.
JOY PICUS DIRECTOR	1	X						0.	0.	0.
RABBI JOEL REMBAUM DIRECTOR	1	X						0.	0.	0.
RABBI RICHARD SPIEGEL DIRECTOR	1	X						0.	0.	0.

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

(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
TZIVIA SCHWARTZ-GETZUG EXECUTIVE DIRECTOR	45						X	137,596.	0.	0.
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<b>1 b Total</b> .....								137,596.	0.	0.

DRAFT

**2** Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ **1**

**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. ....

	Yes	No
<b>3</b>		X
<b>4</b>		X
<b>5</b>		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. ....

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

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

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

**2** Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ **0**

**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>1 a</b>					
	<b>b</b> Membership dues . . . . .	<b>1 b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1 c</b>					
	<b>d</b> Related organizations . . . . .	<b>1 d</b>					
	<b>e</b> Government grants (contributions) . . . .	<b>1 e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . .	<b>1 f</b> 1,933,789.					
	<b>g</b> Noncash contribns included in lns 1a-1f: . . . \$						
<b>h Total.</b> Add lines 1a-1f. . . . . ▶			1,933,789.				
<b>PROGRAM SERVICE REVENUE</b>	<b>Business Code</b>						
	<b>2 a</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) . . . . . ▶		22,705.			22,705.	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . ▶						
	<b>5</b> Royalties . . . . . ▶						
	<b>6 a</b> Gross Rents . . . . .	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses . . . . .						
	<b>c</b> Rental income or (loss) . . . . .						
	<b>d</b> Net rental income or (loss) . . . . . ▶						
	<b>7 a</b> Gross amount from sales of assets other than inventory . . . . .	(i) Securities	(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses . . . . .						
	<b>c</b> Gain or (loss) . . . . .						
	<b>d</b> Net gain or (loss) . . . . . ▶						
	<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> _____							
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d. . . . . ▶							
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . ▶			1,956,494.	0.	0.	22,705.	

**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.	107,292.	107,292.		
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.	369,338.	369,338.		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	137,596.	137,596.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	171,786.	112,710.	30,968.	28,108.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions).				
9 Other employee benefits.				
10 Payroll taxes.	39,362.	30,031.	6,287.	3,044.
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.	7,648.		7,648.	
d Lobbying.				
e Prof fundraising svcs. See Part IV, ln 17.				
f Investment management fees.				
g Other.				
12 Advertising and promotion.	19,845.	10,125.	166.	9,554.
13 Office expenses.				
14 Information technology.	28,360.	23,908.	3,119.	1,333.
15 Royalties.				
16 Occupancy.				
17 Travel.	21,133.	17,620.	2,366.	1,147.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	3,517.	2,779.	457.	281.
23 Insurance.	3,116.	2,476.	376.	264.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CONTRACT SERVICES	208,964.	165,116.	17,998.	25,850.
b PRINTING AND PUBLICATIONS	111,862.	67,236.	709.	43,917.
c RENT	29,509.	23,941.	3,150.	2,418.
d POSTAGE AND SHIPPING	27,828.	17,015.	1,662.	9,151.
e EVENTS	24,315.	21,999.		2,316.
f All other expenses.	67,507.	44,484.	15,367.	7,656.
25 Total functional expenses. Add lines 1 through 24f.	1,378,978.	1,153,666.	90,273.	135,039.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. 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
<b>ASSETS</b>	1 Cash — non-interest-bearing .....	294,458.	1	1,390,295.
	2 Savings and temporary cash investments .....	727,132.	2	
	3 Pledges and grants receivable, net .....	202,500.	3	514,307.
	4 Accounts receivable, net .....		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	658.	9	70,023.
	10a Land, buildings, and equipment: cost basis .....	10a 25,333.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D .....	10b 5,768.	10c	19,565.
	11 Investments — publicly-traded securities .....		11	
	12 Investments — other securities. See Part IV, line 11 .....		12	
	13 Investments — program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....	4,390.	15	2,700.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	1,236,933.	16	1,996,890.	
<b>LIABILITIES</b>	17 Accounts payable and accrued expenses .....	66,686.	17	12,619.
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	236,508.
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow 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 .....		24	
	25 Other liabilities. Complete Part X of Schedule D .....		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	66,686.	26	249,127.
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29 and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	493,323.	27	528,442.
	28 Temporarily restricted net assets .....	676,924.	28	1,219,321.
	29 Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....		32	
	33 <b>Total net assets or fund balances.</b> .....	1,170,247.	33	1,747,763.
	34 <b>Total liabilities and net assets/fund balances.</b> .....	1,236,933.	34	1,996,890.

**Part XI Financial Statements and Reporting**

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a	X
b	Were the organization's financial statements audited by an independent accountant? .....	2b	X
c	If 'Yes' to 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? .....	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....	3a	X
b	If 'Yes,' did the organization undergo the required audit or audits? .....	3b	

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Form 990 (2008)



**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)		372,366.	817,068.	2,238,404.	1,933,789.	5,361,627.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 <b>Total.</b> Add lines 1-3.	0.	372,366.	817,068.	2,238,404.	1,933,789.	5,361,627.
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).						533,237.
6 <b>Public support.</b> Subtract line 5 from line 4.						4,828,390.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4.	0.	372,366.	817,068.	2,238,404.	1,933,789.	5,361,627.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						0.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 <b>Total support.</b> Add lines 7 through 10.						5,361,627.
12 Gross receipts from related activities, etc. (see instructions).					12	0.

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. ☐

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

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)).	14	90.1 %
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f.	15	93.3 %

16a **33-1/3 support test – 2008.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☒

b **33-1/3 support test – 2007.** 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. ☐

17a **10%-facts-and-circumstances test – 2008.** 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. ☐

b **10%-facts-and-circumstances test – 2007.** 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. ☐

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. ☐

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Schedule A (Form 990 or 990-EZ) 2008

**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.)

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 1-5						
<b>7a</b> Amounts included on lines 1, 2, 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
<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 yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 on 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 lns 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 2008 (line 8, column (f) divided by line 13, column (f)).	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)).	<b>17</b>	%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	<b>18</b>	%

**19a 33-1/3 support tests – 2008.** 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 – 2007.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐

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

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

DRAFT

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ **Attach to Form 990, 990-EZ and 990-PF**  
▶ **See separate instructions.**

OMB No. 1545-0047

**2008**

**Name of the organization**

JEWISH WORLD WATCH

**Employer identification number**

20-3406211

**Organization type** (check one):

**Filers of:**

Form 990 or 990-EZ

**Section:**

- ☒ 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 organizations 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 Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/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 Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate 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:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.**

**Schedule B** (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

JEWISH WORLD WATCH

20-3406211

**Part I Contributors** (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MONICA AND PHIL ROSENTHAL 2800 28TH ST. STE 105 SANTA MONICA, CA 90405	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	SUSAN SALTZ 222 COPERTO DRIVE PACIFIC PALISADES, CA 90277	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	THE RIGHTEOUS PERSONS FOUNDATION 2800 28TH ST, STE 105 SANTA MONICA, CA 90405	\$ 120,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	CHARLES R. BRONFMAN PRIZE 110 E 59TH STREET, 26TH FLOOR NEW YORK, NY 11022	\$ 100,000.	Person <input checked="" 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.)

Name of organization

Employer identification number

JEWISH WORLD WATCH

20-3406211

**Part II** Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

JEWISH WORLD WATCH

20-3406211

**Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete cols (a) through (e) and the following line entry.)For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once — see instructions.)

N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

BAA

**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements****Attach to Form 990. To be completed by organizations that  
answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**

OMB No. 1545-0047

**2008****Open to Public  
Inspection**

Name of the organization

JEWISH WORLD WATCH

Employer identification number

20-3406211

**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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other 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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-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 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. ....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easement it holds? ..... ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 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.

1 a If the organization elected, as permitted under SFAS 116, 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, 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 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 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 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other \_\_\_\_\_

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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 Trust, Escrow and Custodial Arrangements** Complete if 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	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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 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 Investment earnings or 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 ☐ Yes ☐ No

(ii) related organizations ☐ Yes ☐ No

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

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

**Part VI Investments—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) Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		23,013.	5,420.	17,593.
e Other		2,320.	348.	1,972.
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				19,565.

BAA

Schedule D (Form 990) 2008

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N/A

**Total.** (Column (b) should equal Form 990 Part X, col. (B) line 12.) ▶

N/A

Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.)

N/A

**Total.** Column (b) Total (should equal Form 990, Part X, col.(B), line 15). . . . . ▶

**Other Liabilities** (See Form 990, Part X, line 25)

**Total.** *Column (b) Total (should equal Form 990, Part X, col. (B) line 25)* ▶

**BAA**

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,956,494.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,378,978.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	577,516.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4-8	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	577,516.

**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	1,956,494.
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	1,956,494.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investments 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 should equal Form 990, Part I, line 12.)	5	1,956,494.

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

1	Total expenses and losses per audited financial statements	1	1,378,978.
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	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,378,978.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments 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 should equal Form 990, Part I, line 18.)	5	1,378,978.

**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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

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**Part XIV** Supplemental Information *(continued)*

DRAFT

Department of the Treasury  
Internal Revenue Service

## Statement of Activities Outside the United States

► **Attach to Form 990.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, line 15, or line 16.

OMB No. 1545-0047

2008

**Open to Public Inspection**

Name of the organization

JEWISH WORLD WATCH

Employer identification number

20-3406211

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

- 1 For grantmakers.** 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 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Totals .....	0	0			0.

**BAA** For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) (2008)

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.. ☐ Use Schedule F-1 (Form 990) if additional space is needed.

[illegible]

<b>2</b>	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ....	▶	<u>0</u>
<b>3</b>	Enter total number of other organizations or entities. ....	▶	<u>1</u>



**Part IV** Supplemental Information

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

DRAFT

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments and Individuals in the U.S.**

► **Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.**  
► **Attach to Form 990.**

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

JEWISH WORLD WATCH

Employer identification number

20-3406211

**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' on 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. Use Part IV and Schedule I-1 (Form 990) 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
EQUAL ACCESS INTERNATIONAL 38 KEYES AVENUE #3, BLDG. 38 SAN FRANCISCO, CA 94129	94-3402601	501 (C) (3)	52,292.	0.			GENDER BASED VIOLENCE PREVENTION
INTERNATIONAL CRISIS GROUP 420 LEXINGTON, STE 2640 NEW YORK, NY 10170	52-5170039	501 (C) (3)	25,000.	0.			RADIO PROGRAMMING SUPPORT FOR
JEWISH FEDERATION COUNCIL OF GREATER 6505 WILSHIRE BLVD. LOS ANGELES, CA 90048	95-1643388	501 (C) (3)	30,000.	0.			RESEARCH FOR PEACE STRATEGY/POLICY
							IN DARFUR HOT MEAL, COUNSELING AND
							HEALTH PROGRAMS IN DARFUR

- 2 Enter total number of section 501(c)(3) and government organizations. **3**
- 3 Enter total number of other organizations. **0**

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) 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.

DRAFT

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**

**Open to Public Inspection**

Name of the organization

JEWISH WORLD WATCH

Employer identification number

20-3406211

**FORM 990, PART III, LINE 1 - ORGANIZATION MISSION**

JEWISH WORLD WATCH WORKS TO MOBILIZE SYNAGOGUES AND THE COMMUNITY TO COMBAT GENOCIDE AND OTHER ATROCITIES WORLDWIDE THROUGH EDUCATION, ADVOCACY AND REFUGEE RELIEF.

AS OF DECEMBER 31, 2008 JWW HAD A MEMBERSHIP OF 64 SYNAGOGUES, ALL LOCATED IN CALIFORNIA. THE DOMINANT PURPOSE AND FUNCTION OF JEWISH WORLD WATCH IS TO EDUCATE THE COMMUNITY ABOUT GENOCIDE, INASMUCH AS EDUCATION IS A NECESSARY PRE-REQUISITE TO ACHIEVING THE OTHER TWO JWW OBJECTIVES. CURRENTLY, AND SINCE ITS INCEPTION, JWW FOCUSES ON THE GENOCIDE IN DARFUR, SUDAN AND THE ONGOING CONFLICT IN THE DEMOCRATIC REPUBLIC OF CONGO. HOWEVER, JWW CONSIDERS OTHER GLOBAL HUMAN RIGHTS CRISES ON A QUARTERLY BASIS TO DETERMINE WHETHER ITS FOCUS ON ITS CURRENT PRIORITY AREAS REMAINS APPROPRIATE.

UNTIL DECEMBER 1, 2006, JWW PRESIDENT, JANICE KAMENIR REZNIK, ACTED AS EXECUTIVE DIRECTOR AND DEVELOPMENT DIRECTOR ON A PRO BONO BASIS. ON DECEMBER 1, 2006 JWW HIRED TZIVIA SCHWARTZ GETZUG AS FULL TIME EXECUTIVE DIRECTOR, AND SHE CONTINUES TO SERVE IN THIS ROLE. JWW FURTHER HIRED NAAMA HAVIV AS ASSISTANT DIRECTOR ON APRIL 2, 2007, AND HIRED ARI AVERBACH IN A PROGRAM SUPPORT ROLE IN DECEMBER 2007. IN MARCH 2008, JWW HIRED MINA RUSH AS ITS SYNAGOGUE RESOURCE DIRECTOR.

IN THE SHORT TIME SINCE JWW'S INCEPTION, THE ORGANIZATION HAS MADE GREAT STRIDES TOWARDS ACHIEVING ITS MISSION GOALS WHICH ARE:

EDUCATION: JWW HAS BUILT A STRONG REPUTATION AS A LEADER WITHIN THE SOUTHERN CALIFORNIA COMMUNITY IN RAISING AWARENESS ABOUT DARFUR AND CONGO AND CALLING COMMUNITIES TO ACTION.

ADVOCACY: JWW VOLUNTEERS, ALONG WITH THE ANTI-GENOCIDE ACTIVIST VOLUNTEER COMMUNITY NATIONWIDE, RALLY CONSTITUENTS TO MAKE IT CLEAR TO US LEGISLATORS AND INTERNATIONAL OFFICIALS THAT BRINGING PEACE TO SUDAN, ENDING THE GENOCIDE IN DARFUR AND ENDING THE

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**FORM 990, PART III, LINE 1 - ORGANIZATION MISSION (CONTINUED)**

CRISIS IN CONGO ARE ISSUES THAT CANNOT BE IGNORED. LEGISLATIVE PRIORITIES ARE ESTABLISHED BY VOLUNTEER COMMITTEES WHO WORK COLLABORATIVELY AT THE NATIONAL LEVEL, AS JWW IS A MEMBER OF THE SAVE DARFUR COALITION AND WORKS CLOSELY WITH OTHER ANTI-GENOCIDE ORGANIZATIONS SUCH AS THE ENOUGH PROJECT AND GENOCIDE INTERVENTION NETWORK. WORKING WITH NATIONAL ORGANIZATIONS, JWW VOLUNTEER EFFORTS SUPPORT POLICIES THAT HELP BUILD A PEACE PROCESS IN SUDAN, PROTECT DARFURI CIVILIANS BY FUNDING AND DEPLOYING PEACEKEEPERS, AND PUNISH PERPETRATORS OF GENOCIDE BY IMPLEMENTING SANCTIONS AND PROVIDING SUPPORT TO INTERNATIONAL CRIMINAL COURT INVESTIGATIONS. JWW ALSO WORKS TO END THE USE OF MINERALS SOURCED FROM ILLEGAL MINES IN CONGO AND TO SUPPORT LEGISLATION TO IMPROVE THE LIVES OF THE VICTIMS OF WAR IN CONGO.

REFUGEE RELIEF: SINCE ITS INCEPTION, JWW HAS LED THE COMMUNITY IN RAISING OVER \$3 MILLION SPECIFICALLY FOR PROVIDING RELIEF FOR DARFURI REFUGEES. THESE FUNDS HAVE BEEN ALLOCATED TO THE BUILDING OF 3 MEDICAL CLINICS IN DARFUR AND THE CENTRAL AFRICAN REPUBLIC, WATER RECLAMATION AND IRRIGATION PROJECTS, THE REHABILITATION OF NINE YOUTH CENTERS IN THE OURE CASSONI CAMP, PSYCHOSOCIAL COUNSELING FOR DARFURI REFUGEES AND MANY OTHER PROJECTS. ONCE THE JWW BOARD VOTES TO ALLOCATE FUNDS FOR A RELIEF PROJECT, THE FUNDS ARE HELD IN RESERVE UNTIL CERTAIN BENCHMARKS ARE MET AND REPORTS ARE RECEIVED; OFTEN THE FUNDS ARE DISTRIBUTED IN INCREMENTAL AMOUNTS UNTIL PROOF OF PROJECT COMPLETION IS RECEIVED BY JWW.

**FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS**

REFUGEE RELIEF: JWW WORKS TO PROVIDE FOOD, ECONOMIC AND PERSONAL SECURITY TO THE SURVIVORS OF GENOCIDE. SINCE ITS FOUNDING, JWW HAS RAISED OVER \$3 MILLION SPECIFICALLY FOR PROVIDING RELIEF FOR DARFURI REFUGEES. JWW PROJECTS ADDRESS THREE MAIN ISSUES:

WOMEN IN CRISIS: GENOCIDE AND OTHER CONFLICTS AFFECT WHOLE COMMUNITIES, BUT DISPROPORTIONATELY IMPACT WOMEN AND GIRLS. DUE TO THEIR STATUS IN SOCIETY, WOMEN ARE

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**FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)**

OFTEN SUBJECT TO GENDER-BASED VIOLENCE. BUT THEY PLAY ESSENTIAL ROLES AS SURVIVORS AND REBUILDERS OF SOCIETY. JWW HELPS WOMEN SURVIVORS REBUILD THEIR LIVES THROUGH A HOLISTIC APPROACH THAT PROVIDES RELIEF, RESTORES DIGNITY, BUILDS SKILLS, AND PROVIDES FOR ECONOMIC DEVELOPMENT AND EMPOWERMENT. PROJECTS INCLUDE:

SOLAR COOKER PROJECT (SCP): WOMEN REFUGEES ARE PARTICULARLY VULNERABLE WHILE PERFORMING THE CRITICAL TASK OF COLLECTING FIREWOOD FOR COOKING. THE VISION OF THE JWW SOLAR COOKER PROJECT IS TO A) DIMINISH THE VULNERABILITY OF WOMEN TO SEXUAL VIOLENCE AND PROVIDE THEM WITH GREATER PERSONAL SECURITY; B) CREATE AN ENVIRONMENTALLY SUSTAINABLE SOLUTION BY USING THE RENEWABLE ENERGY OF THE SUN TO DRASTICALLY REDUCE THE RELIANCE ON FIREWOOD; AND C) CONTRIBUTE TO A GLOBAL PARTNERSHIP FOR DEVELOPMENT BY TRAINING AND EMPLOYING REFUGEES IN THE ASSEMBLY AND REPAIR OF SOLAR COOKERS, WHICH PROVIDES THEM WITH DECENT WORK.

RECYCLED WATER GARDENS: WITH THE INSTALLATION OF INEXPENSIVE PLASTIC SHEETING AND PVC PIPES, WOMEN IN REFUGEE CAMPS HAVE TURNED THEIR FAMILY BATHING AREAS INTO RESERVOIRS FOR GREY-WATER COLLECTION. THE COLLECTED WATER IS USED TO IRRIGATE SMALL VEGETABLE PATCHES, TO SUPPLEMENT A FAMILY'S MEAGER FOOD RATIONS AND TO PROVIDE A FURTHER SOURCE OF INCOME, AS VEGETABLES AND SEEDS ARE SOLD AT MARKET. JWW IS SUPPORTING THIS PROJECT IN THE IRIDIMI, TOULOU AND OURE CASSONI REFUGEE CAMPS.

"SHE SPEAKS, SHE LISTENS": USING A SOAP OPERA FORMAT, THIS INNOVATIVE RADIO PROGRAM TEACHES BOTH WOMEN AND MEN IN REFUGEE CAMPS ABOUT WOMEN'S RIGHTS AND THE SCOURGE OF GENDER-BASED VIOLENCE. WOMEN PARTICIPATE IN LISTENING GROUPS, WHERE THEY DISCUSS THE PROGRAMS AND MAKE SUGGESTIONS FOR FUTURE EPISODES.

CHILDREN IN CRISIS: WITH AN ENTIRE GENERATION GROWING UP IN REFUGEE CAMPS, THE FUTURE OF DARFUR IS IN JEOPARDY UNLESS WE CAN PROVIDE FOR THE HEALTH AND WELL-BEING OF DARFURI REFUGEE CHILDREN. PROJECTS INCLUDE:

BACKPACK PROJECT: JWW HAS DISTRIBUTED 15,000 BACKPACKS FILLED WITH SCHOOL SUPPLIES,

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**FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)**

SHOES AND BASIC HYGIENE ITEMS TO CHILDREN OF THE OURE CASSONI REFUGEE CAMP IN CHAD.

DILLON HENRY YOUTH CENTERS: WITH THE DILLON HENRY FOUNDATION, JWW IS RESTORING NINE YOUTH CENTERS IN THE OURE CASSONI REFUGEE CAMP. THESE "CHILD-SAFE SPACES" PROVIDE CHILDREN WITH A PHYSICALLY AND PSYCHOLOGICALLY SAFE SPACE TO INTERACT WITH PEERS, PLAY TEAM SPORTS AND PARTICIPATE IN INFORMAL EDUCATIONAL ACTIVITIES, INCLUDING THE DEVELOPMENT AND PUBLICATION OF A YOUTH-RUN CAMP NEWSLETTER.

SISTER SCHOOLS: JWW IS FUNDING THE CONSTRUCTION, EQUIPPING AND STAFFING OF TWO SECONDARY SCHOOLS IN THE DJABAL CAMP IN EASTERN CHAD. EACH SCHOOL WILL SERVE APPROXIMATELY 700 STUDENTS.

DARFURI CHILDREN IN ISRAEL: JWW HAS SUPPORTED THE HEALTH AND WELL-BEING OF DARFURI REFUGEE CHILDREN AT THE BIALIK ROGOSIN SCHOOL IN TEL AVIV. AFTER TRAVELING TO ISRAEL BY FOOT AND UNDERGOING A HARROWING EXPERIENCE, THE CHILDREN RECEIVE HOT MEALS, PSYCHOSOCIAL COUNSELING AND HEALTH AND HYGIENE WORKSHOPS SPONSORED BY JWW, WHICH PROVIDE BOTH THE CHILDREN AND THEIR PARENTS WITH THE ESSENTIALS FOR ENSURING THE CHILDREN'S SUCCESS IN THE FUTURE.

HEALTH AND SAFETY: JWW WORKS TO MAINTAIN THE HEALTH OF REFUGEES THROUGH PROJECTS THAT BOTH PROVIDE MUCH-NEEDED MEDICAL AID AND SUPPLIES AND FURTHER DEVELOP THE KNOWLEDGE AND SKILLS OF THE REFUGEES THEMSELVES TO MAINTAIN THEIR OWN HEALTH AND SANITATION.

PROJECTS INCLUDE:

MEDICAL CLINICS: JWW HAS BUILT THREE MEDICAL CLINICS - TWO IN DARFUR AND THE DILLON HENRY HEALTH CLINIC IN THE CENTRAL AFRICAN REPUBLIC TO SERVE THE DARFURI AND LOCAL POPULATIONS. HEALTH POSTS: JWW IS FUNDING THE REHABILITATION AND STAFFING OF FOUR HEALTH POSTS IN THE CENTRAL AFRICAN REPUBLIC.

**FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS**

EDUCATION: JWW HAS BUILT A STRONG REPUTATION AS A LEADER WITHIN THE SOUTHERN CALIFORNIA COMMUNITY AND BEYOND IN RAISING AWARENESS ABOUT CRISES IN SUDAN AND CONGO

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**FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)**

AND CALLING COMMUNITIES TO ACTION. JWW REACHES OUT TO SCHOOLS, BUSINESSES, RELIGIOUS INSTITUTIONS AND COMMUNITY ORGANIZATIONS OF EVERY KIND FOR INVOLVEMENT AND ACTION ON DARFUR, SUDAN AND CONGO. WE HAVE HELD DOZENS OF COMMUNITY-WIDE EVENTS, HUNDREDS OF SPEAKING ENGAGEMENTS AND DOZENS OF SCHOOL-WIDE ACTIONS, EDUCATING THOUSANDS OF PEOPLE OF ALL AGES. JWW EDUCATES THE COMMUNITY ABOUT BOTH THE HISTORY OF GENOCIDE, THE SPECIAL RESPONSIBILITY OUR COMMUNITY HOLDS IN COMBATING GENOCIDE, AND ABOUT THE CURRENT SITUATIONS IN SUDAN AND CONGO. WE ALSO TEACH OUR CONSTITUENTS HOW TO HELP COMBAT THE GENOCIDE, AND PREVENT FUTURE GENOCIDES IN TURN.

JWW HAS AN EXTENSIVE SPEAKERS BUREAU TRAINED TO DELIVER MULTIMEDIA PRESENTATIONS TO ALL AGES. OUR COMMUNITY EVENTS, INCLUDING CITY-WIDE PROGRAMS, HAVE ATTRACTED THOUSANDS. WE HAVE PROMOTED EDUCATIONAL PROGRAMS IN SUMMER CAMPS AND SCHOOLS, REACHING OVER 30,000 YOUNG PEOPLE. JWW'S INNOVATIVE PROGRAM "ACT," ITS ACTIVIST CERTIFICATION AND TRAINING PROGRAM, OFFERS STUDENTS IN-DEPTH TRAINING IN THE ESSENTIAL SKILLS OF ACTIVISM AND HAS TRAINED HUNDREDS OF HIGH SCHOOL AND MIDDLE SCHOOL STUDENTS IN THESE SKILLS.

JWW HAS ALSO BEEN AT THE FOREFRONT OF CAMPAIGNS TO EDUCATE AND RAISE AWARENESS ON THE PART OF THE CITY OF LOS ANGELES, THE STATE OF CALIFORNIA, OTHER LOCAL GOVERNMENTS, AND OTHER ENTITIES AND INDIVIDUALS ABOUT THE VALUE OF DIVESTING FROM COMPANIES DOING BUSINESS IN SUDAN. JWW VOLUNTEERS HAVE WORKED WITH THE SUDAN DIVESTMENT TASK FORCE TO CONVINCE THE UNIVERSITY OF CALIFORNIA REGENTS TO VOTE IN FAVOR OF DIVESTMENT AND THE STATE LEGISLATURE TO PASS LEGISLATION THAT WAS SIGNED BY GOVERNOR SCHWARZENEGGER, ENACTING UC DIVESTMENT LEGISLATION AND REQUIRING DIVESTMENT BY THE STATE RETIREMENT FUNDS, CALPERS AND CALSTRS.

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**FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)**

JWW VOLUNTEERS CONTRIBUTED SIGNIFICANTLY TO THE CALIFORNIA STATE, CITY OF LOS ANGELES, AND LOS ANGELES COUNTY DIVESTMENT CAMPAIGNS AS WELL, AND CONTINUE TO WORK ON FURTHER DIVESTMENT EFFORTS AT THE LOCAL, CITY, AND FEDERAL LEVELS. JWW FURTHER LED THE SUCCESSFUL CALIFORNIA EFFORT TO BAN STATE CONTRACTS WITH WORST-OFFENDING COMPANIES DOING BUSINESS IN SUDAN.

JWW HAS ALSO HELD VIGILS AND OTHER PUBLIC RALLIES TO HELP TO PLACE DARFUR AND CONGO IN THE MEDIA AND OFFER CONCRETE OPPORTUNITIES FOR ENGAGEMENT FOR ACTIVISTS. JWW HAS JOINED NATIONAL RALLIES IN DC AND SAN FRANCISCO, AS WELL AS INITIATING LOCAL PROTESTS IN SOUTHERN CALIFORNIA, INCLUDING RECENT VIGILS IN FRONT OF THE CHINESE CONSULATE AND THE HIGHLY SUCCESSFUL WALK FOR DARFUR: WALK TO END GENOCIDE.

OTHER JWW EDUCATION/ADVOCACY STRATEGIES INCLUDE:

"30-SECOND ACTIONS: A COLLECTION OF QUICK-CLICK ELECTRONIC POSTCARDS, LETTERS, OR PHONE CALL TALKING POINTS, THESE LOW-RESISTANCE CAMPAIGNS ALLOW JWW CONSTITUENTS TO TAKE IMMEDIATE ACTION ON AN ISSUE.

"LETTERS TO THE EDITOR: LETTERS TO THE EDITOR AND OTHER OPINION PIECES ENSURE THAT THE ISSUE OF DARFUR REMAINS FOREFRONT IN THE MEDIA - WHICH IN TURN RAISES AWARENESS AMONG THE GENERAL POPULATION AND POLITICAL LEADERS. JWW HAS SUBMITTED AND PUBLISHED LETTERS TO THE EDITOR OF SEVERAL MAJOR NEWSPAPERS AND JOURNALS, AND HAS ALSO ENCOURAGED ITS CONSTITUENTS TO WRITE LETTERS ASKING FOR MORE COVERAGE ON THE ISSUE.

MEETINGS WITH INTERNATIONAL OFFICIALS: SEVERAL INTERNATIONAL PLAYERS HAVE SIGNIFICANT INFLUENCE IN FINDING A RESOLUTION TO THE CRISIS IN DARFUR. ENGAGING WITH THESE

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**FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)**

STAKEHOLDERS IS ESSENTIAL FOR KEEPING DARFUR ON AN INTERNATIONAL AGENDA. THROUGH ITS CARAVAN FOR PEACE PROGRAM, JWW ORGANIZED A CARAVAN OF SURVIVORS OF PAST GENOCIDES TO MEET WITH CONSULS GENERAL ACROSS LOS ANGELES. RECENTLY, JWW HAS BEEN IN CONSULTATION WITH CHINESE OFFICIALS REGARDING CHINA'S SIGNIFICANT RELATIONSHIP WITH SUDAN. JWW HAS HAD THE OPPORTUNITY, MOREOVER, TO PARTICIPATE IN A SERIES OF MEETINGS WITH THE PERMANENT MEMBERS OF THE UN SECURITY COUNCIL AND OTHER KEY ACTORS WITHIN THE UN IN CONJUNCTION WITH INTERNATIONAL CRISIS GROUP.

**FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION**

OTHER PROGRAM SERVICES

**FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS**

THE TREASURER WILL REVIEW THE FORM 990 BEFORE PRESENTING IT TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL.

**FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C**

AT THE NEXT BOARD MEETING, THE CONFLICT OF INTEREST POLICY WILL BE CIRCULATED TO ALL BOARD MEMBERS AND WILL REQUIRE A SIGNATURE OF APPROVAL. THE POLICY WILL HENCEFORTH BE CIRCULATED TO THE BOARD AT THE BEGINNING OF EACH FISCAL YEAR AND WILL REQUIRE A SIGNATURE OF APPROVAL.

**FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEE**

THE PROCESS FOR DETERMINING COMPENSATION OF THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES INCLUDES A REVIEW, DISCUSSION AND APPROVAL BY THE BOARD OF DIRECTORS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT. THE PROCESS IS WHOLLY INDEPENDENT OF THE PERSON BEING COMPENSATED. THE EXECUTIVE COMMITTEE MAKES COMPENSATION DECISIONS BY LOOKING AT COMPARABILITY DATA, THE SKILLS AND EXPERTISE OF THE EXECUTIVE AND THE PERFORMANCE IN MEETING GOALS AND EXPECTATIONS.

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**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

JEWISH WORLD WATCH MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH WWW.GUIDESTAR.ORG, A PUBLIC WEBSITE. THESE DOCUMENTS ARE ALSO AVAILABLE UPON REQUEST.

DRAFT

2008

California Exempt Organization  
Annual Information Return

199

Calendar year 2008 or fiscal year beginning month day year, and ending month day year

A First Return Filed? ☐ Yes  
☒ NoB Type of organization Exempt under Section 23701 D (insert letter)  
IRC Section 4947(a)(1) trust ☐

CORP #

2797942

Corporation/Organization Name

FEIN

JEWISH WORLD WATCH

20-3406211

Address

17514 VENTURA BLVD. #206

City

State ZIP Code

ENCINO, CA 91316

C Amended Return? ☐ Yes ☒ NoD Are you a subordinate/affiliate in a group exemption? ☐ Yes ☒ Noa Is this a group filing for affiliates?  
See General Instruction L. ☐ Yes ☒ Nob If 'Yes,' enter the number of affiliates ☐ Yes ☒ Noc Are all affiliates included? ☒ Yes ☐ No  
(If 'No,' attach a list. See instructions.)d Is this a separate return filed by an organization  
covered by a group ruling? ☐ Yes ☒ Noe Federal Group Exemption Number ☐ Yes ☒ Nof Is a roster of subordinates attached? ☐ Yes ☒ No

E Final return?

☐ Dissolved ☐ Surrendered (Withdrawn)☐ Merged/Reorganized (attach explanation)If a box is checked, enter date ☐F Check the box if the organization filed: 1 ☐ 990T 2 ☐ 990PF  
3 ☐ 990HG If organization is exempt under R&TC Section 23701d and is  
exclusively religious, educational, or charitable, and is supported  
primarily (50% or more) by public contributions, check box.  
See General Instruction F. No filing fee is required. ☒H Accounting method used. 1 ☐ Cash 2 ☒ Accrual 3 ☐ OtherI If exempt under R&TC Section 23701d, has the  
organization during the year: (1) participated in any  
political campaign or (2) attempted to influence  
legislation or any ballot measure, or (3) made an  
election under R&TC Section 23704.5 (relating to  
lobbying by public charities)? If 'Yes,' complete and  
attach form FTB 3509, Political or Legislative  
Activities by Section 23701d Organizations. ☐ Yes ☒ NoJ Did the organization have any changes in its activities,  
governing instrument, articles of incorporation, or  
bylaws that have not been reported to the Franchise  
Tax Board? If 'Yes,' complete an explanation and  
attach copies of revised documents. ☐ Yes ☒ NoK Is the organization exempt under R&TC Section 23701g? ☐ Yes ☒ NoIf 'Yes,' enter amount of gross receipts from  
nonmember sources. \$ ☐L Is the organization under audit by the IRS or has the  
IRS audited in a prior year? ☐ Yes ☒ NoM Is the organization a Limited Liability Corporation? ☐ Yes ☒ NoN Did the organization file Form 100 or Form 109 to  
report taxable income? ☐ Yes ☒ No

## Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	● 1	22,705.
	2	Gross dues and assessments from members and affiliates	● 2	
	3	Gross contributions, gifts, grants, and similar amounts received. SEE SCH. B	● 3	1,933,789.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed.</b> If the result is less than \$25,000, see General Instruction C.	● 4	1,956,494.
	5	Cost of goods sold	● 5	
	6	Cost or other basis, and sales expenses of assets sold	● 6	
	7	Total costs. Add line 5 and line 6	7	
	8	Total gross income. Subtract line 7 from line 4	● 8	1,956,494.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	● 9	1,378,978.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	● 10	577,516.
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F	11	
	12	Total Payments	12	
	13	Penalties and Interest. See General Instruction J	13	
	14	Use tax. See General Instruction K	● 14	
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result	15	
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Title	Date	● Telephone
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	● Preparer's SSN/PTIN
	Firm's name (or yours, if self-employed) and address			P00006547
				● FEIN
				95-3404284
				● Telephone
			(818) 907-6500	
May the FTB discuss this return with the preparer shown above? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

**Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts—complete Part II or furnish substitute information. See Specific Line Instructions.**

<b>Receipts from Other Sources</b>	<b>1</b>	Gross sales or receipts from all business activities. See instructions.....	● <b>1</b>	
	<b>2</b>	Interest .....	● <b>2</b>	22,705.
	<b>3</b>	Dividends .....	● <b>3</b>	
	<b>4</b>	Gross rents .....	● <b>4</b>	
	<b>5</b>	Gross royalties .....	● <b>5</b>	
	<b>6</b>	Gross amount received from sale of assets (See Instructions) .....	● <b>6</b>	
	<b>7</b>	Other income. Attach schedule .....	● <b>7</b>	
	<b>8</b>	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1 .....	<b>8</b>	22,705.
<b>Expenses and Disbursements</b>	<b>9</b>	Contributions, gifts, grants, and similar amounts paid. Attach schedule ..... SEE . STATEMENT . 1	● <b>9</b>	476,630.
	<b>10</b>	Disbursements to or for members .....	● <b>10</b>	
	<b>11</b>	Compensation of officers, directors, and trustees. Attach schedule .... SEE . STATEMENT . 2	● <b>11</b>	137,596.
	<b>12</b>	Other salaries and wages .....	● <b>12</b>	171,786.
	<b>13</b>	Interest .....	● <b>13</b>	
	<b>14</b>	Taxes .....	● <b>14</b>	39,362.
	<b>15</b>	Rents .....	● <b>15</b>	
	<b>16</b>	Depreciation and depletion (See Instructions) .....	● <b>16</b>	3,517.
	<b>17</b>	Other. Attach schedule .....	● <b>17</b>	550,087.
	<b>18</b>	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9 .....	<b>18</b>	1,378,978.

**Schedule L Balance Sheets**

	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
<b>1</b> Cash .....		1,021,590.		1,390,295.
<b>2</b> Net accounts receivable .....		202,500.		514,307.
<b>3</b> Net notes receivable. Attach schedule .....				
<b>4</b> Inventories .....				
<b>5</b> Federal and state government obligations .....				
<b>6</b> Investments in other bonds. Attach sch .....				
<b>7</b> Investments in stock. Attach schedule .....				
<b>8</b> Mortgage loans (number of loans .....)				
<b>9</b> Other investments. Attach schedule .....				
<b>10a</b> Depreciable assets .....	10,045.		25,333.	
<b>b</b> Less accumulated depreciation .....	2,250.	7,795.	5,768.	19,565.
<b>11</b> Land .....				
<b>12</b> Other assets. Attach schedule .....		5,048.		72,723.
<b>13</b> <b>Total assets</b> .....		1,236,933.		1,996,890.
<b>Liabilities and net worth</b>				
<b>14</b> Accounts payable .....		66,686.		12,619.
<b>15</b> Contributions, gifts, or grants payable .....				
<b>16</b> Bonds and notes payable. Attach schedule .....				
<b>17</b> Mortgages payable .....				
<b>18</b> Other liabilities. Attach schedule .....				236,508.
<b>19</b> Capital stock or principle fund .....		1,170,247.		1,747,763.
<b>20</b> Paid-in or capital surplus. Attach reconciliation .....				
<b>21</b> Retained earnings or income fund .....				
<b>22</b> <b>Total liabilities and net worth</b> .....		1,236,933.		1,996,890.

**Schedule M-1 Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

<b>1</b> Net income per books .....	● 577,516.	<b>7</b> Income recorded on books this year not included in this return. Attach schedule .....	●
<b>2</b> Federal income tax .....	●	<b>8</b> Deductions in this return not charged against book income this year. Attach schedule .....	●
<b>3</b> Excess of capital losses over capital gains .....	●	<b>9</b> Total. Add line 7 and line 8 .....	
<b>4</b> Income not recorded on books this year. Attach schedule .....	●	<b>10</b> Net income per return. Subtract line 9 from line 6 .....	
<b>5</b> Expenses recorded on books this year not deducted in this return. Attach schedule .....	●		
<b>6</b> Total. Add line 1 through line 5 .....	577,516.		577,516.

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

Department of the Treasury  
Internal Revenue Service

CALIFORNIA COPY

**Schedule of Contributors**

- ▶ **Attach to Form 990, 990-EZ and 990-PF**  
▶ **See separate instructions.**

OMB No. 1545-0047

**2008**

Name of the organization

JEWISH WORLD WATCH

Employer identification number

20-3406211

**Organization type** (check one):

**Filers of:**

Form 990 or 990-EZ

**Section:**

- ☒ 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 organizations 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 Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/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 Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate 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:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.**

**Schedule B** (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

JEWISH WORLD WATCH

20-3406211

**Part I Contributors** (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MONICA AND PHIL ROSENTHAL 2800 28TH ST. STE 105 SANTA MONICA, CA 90405	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	SUSAN SALTZ 222 COPERTO DRIVE PACIFIC PALISADES, CA 90277	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	THE RIGHTEOUS PERSONS FOUNDATION 2800 28TH ST, STE 105 SANTA MONICA, CA 90405	\$ 120,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	CHARLES R. BRONFMAN PRIZE 110 E 59TH STREET, 26TH FLOOR NEW YORK, NY 11022	\$ 100,000.	Person <input checked="" 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.)

Name of organization

Employer identification number

JEWISH WORLD WATCH

20-3406211

**Part II** Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

JEWISH WORLD WATCH

20-3406211

**Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete cols (a) through (e) and the following line entry.)For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once — see instructions.)

N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

BAA

**2008****Corporation Depreciation and Amortization****3885**

Attach to Form 100 or Form 100W. FORM 199

Corporation name

California corporation number

JEWISH WORLD WATCH

2797942

**Part I Election to Expense Certain Property Under IRC Section 179**

1	Maximum deduction under Section 179 for California .....	1	\$25,000
2	Total cost of Section 179 property placed in service .....	2	
3	Threshold cost of Section 179 property before reduction in limitation .....	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0- .....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected Section 179 cost) .....	7	
8	Total elected cost of Section 179 property. Add amounts in column (c), lines 6 and 7. ....	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8. ....	9	
10	Carryover of disallowed deduction from prior taxable years. ....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 .....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 .....	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12. ....	13	

**Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356**

14	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Deprecia- tion method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
	EPSON DESKTOP PR	2/27/06	1,869.	778.	S/L	5	374.	
	COMPUTER	5/30/06	1,678.	672.	S/L	5	336.	
	COMPUTER	12/11/06	1,101.	440.	S/L	5	220.	
	COMPUTER	4/20/07	1,088.	145.	S/L	5	218.	
	COMPUTER	7/06/07	769.	77.	S/L	5	154.	
	COMPUTER	7/06/07	1,369.	137.	S/L	5	274.	
	COMPUTER	12/20/07	1,100.		S/L	5	220.	
15	Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h). ....						15	3,517.

**Part III Summary**

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) <b>or</b> Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) <b>or</b> Depreciation (if no election is made), enter the amount from line 15, column (g). ....	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22. ....	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) ....	18	

**Part IV Amortization**

19	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20	Total. Add the amounts in column (g). ....						20
21	Total amortization claimed for federal purposes from federal Form 4562, line 44. ....						21
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. ....						22

**2008****Corporation Depreciation and Amortization****3885**

Attach to Form 100 or Form 100W. FORM 199

Corporation name

California corporation number

JEWISH WORLD WATCH

2797942

**Part I Election to Expense Certain Property Under IRC Section 179**

1	Maximum deduction under Section 179 for California .....	1	\$25,000
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4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0- .....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected Section 179 cost) .....	7	
8	Total elected cost of Section 179 property. Add amounts in column (c), lines 6 and 7. ....	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8. ....	9	
10	Carryover of disallowed deduction from prior taxable years. ....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 .....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 .....	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 .....	13	

**Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356**

14	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Deprecia- tion method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
	COMPUTER	12/20/07	760.		S/L	5	152.	
	COMPUTER	12/20/07	310.		S/L	5	62.	
	COMPUTER	3/06/08	1,808.		S/L	5	301.	
	SOFTWARE	3/07/08	3,521.		S/L	5	587.	
	FURNITURE	4/10/08	2,320.		S/L	5	348.	
	COMPUTER	10/10/08	1,025.		S/L	5	51.	
	COMPUTER	10/24/08	3,257.		S/L	5	109.	
15	Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h) .....						15	

**Part III Summary**

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) <b>or</b> Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) <b>or</b> Depreciation (if no election is made), enter the amount from line 15, column (g) .....	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22 .....	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) .....	18	

**Part IV Amortization**

19	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20	Total. Add the amounts in column (g) .....						20
21	Total amortization claimed for federal purposes from federal Form 4562, line 44 .....						21
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12 .....						22

**2008****Corporation Depreciation and Amortization****3885**

Attach to Form 100 or Form 100W. FORM 199

Corporation name

California corporation number

JEWISH WORLD WATCH

2797942

**Part I Election to Expense Certain Property Under IRC Section 179**

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3	Threshold cost of Section 179 property before reduction in limitation .....	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0- .....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected Section 179 cost) .....	7	
8	Total elected cost of Section 179 property. Add amounts in column (c), lines 6 and 7. ....	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8. ....	9	
10	Carryover of disallowed deduction from prior taxable years. ....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 .....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 .....	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 .....	13	

**Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356**

14	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Deprecia- tion method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
	SERVER	10/31/08	3,357.		S/L	5	112.	
15	Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h) .....						15	

**Part III Summary**

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) <b>or</b> Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) <b>or</b> Depreciation (if no election is made), enter the amount from line 15, column (g) .....	16	
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22 .....	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) .....	18	

**Part IV Amortization**

19	(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instr)	(f) Period or percentage	(g) Amortization for this year
20	Total. Add the amounts in column (g) .....						20
21	Total amortization claimed for federal purposes from federal Form 4562, line 44. ....						21
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. ....						22

## JEWISH WORLD WATCH

20-3406211

## STATEMENT 1

## FORM 199, PART II, LINE 9

## CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: SOCIAL JUSTICE  
 DONEE'S NAME: INTERNATIONAL CRISIS GROUP  
 DONEE'S STREET ADDRESS: 420 LEXINGTON AVE, STE 2640  
 DONEE'S CITY, STATE, ZIP: NEW YORK, NY 10170  
 RELATIONSHIP OF DONEE: NONE  
 AMOUNT GIVEN: \$ 25,000.

CLASS OF ACTIVITY: SOCIAL SERVICES  
 DONEE'S NAME: KOZON  
 DONEE'S STREET ADDRESS: VAN BALVERENWEG 55  
 DONEE'S CITY, STATE, ZIP: 6721 ZV BENNEKOM HOL, NETHERLANDS  
 RELATIONSHIP OF DONEE: NONE  
 AMOUNT GIVEN: 369,338.

CLASS OF ACTIVITY: SOCIAL SERVICES  
 DONEE'S NAME: JEWISH FEDERATION COUNCIL  
 DONEE'S STREET ADDRESS: 6505 WILSHIRE BLVD  
 DONEE'S CITY, STATE, ZIP: LOS ANGELES, CA 90048  
 RELATIONSHIP OF DONEE: NONE  
 AMOUNT GIVEN: 30,000.

CLASS OF ACTIVITY: EDUCATIONAL  
 DONEE'S NAME: EQUAL ACCESS  
 DONEE'S STREET ADDRESS: 38 KEYES AVENUE #3 BUILDING 38  
 DONEE'S CITY, STATE, ZIP: SAN FRANCISCO, CA 94129  
 RELATIONSHIP OF DONEE: NONE  
 AMOUNT GIVEN: 52,292.

TOTAL \$ 476,630.

## STATEMENT 2

## FORM 199, PART II, LINE 11

## COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

## CURRENT OFFICERS:

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JANICE KAMENIR REZNIK 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	PRESIDENT 25.00	\$ 0.	\$ 0.	0.
MARCY RAINEY 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	TREASURER 5.00	0.	0.	0.
RABBI HAROLD M. SCHULWEIS 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	CHAIRMAN 5.00	0.	0.	0.

**STATEMENT 2 (CONTINUED)**  
**FORM 199, PART II, LINE 11**  
**COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES**

**CURRENT OFFICERS:**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
HONEY AMADO 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
JULIE BRAM 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
STUART GABRIEL 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
SHEILA GORDON WASSERMAN 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 5.00	0.	0.	0.
DIANE KABAT 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
PAM KAIZER 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	SECRETARY 1.00	0.	0.	0.
RABBI YOSEF KANEFSKY 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
RABBI ALAN LACHTMAN 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
SHELBY LAYNE 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
RABBI JOSHUA LEVINE-GRATER 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
PETER MARCUS 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	VICE PRESIDENT 1.00	0.	0.	0.
JOY PICUS 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.

**STATEMENT 2 (CONTINUED)**  
**FORM 199, PART II, LINE 11**  
**COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES**

**CURRENT OFFICERS:**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
RABBI JOEL REMBAUM 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
RABBI RICHARD SPIEGEL 16944 VENTURA BLVD. STE.1 ENCINO, CA 91316	DIRECTOR 1.00	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

**STATEMENT 3**  
**FORM 199, PART II, LINE 17**  
**OTHER EXPENSES**

ACCOUNTING FEES..... \$ 7,648.  
 ADVERTISING AND PROMOTION..... 19,845.  
 AUTOMOBILE EXP..... 5,239.  
 BANK CHARGES..... 9,547.  
 CONTRACT SERVICES..... 208,964.  
 DESIGN FEES..... 16,269.  
 DUES & SUBSCRIPTIONS..... 217.  
 EQUIPMENT RENTAL..... 15,209.  
 EVENTS..... 24,315.  
 INFORMATION TECHNOLOGY..... 28,360.  
 INSURANCE..... 3,116.  
 OFFICE EXPENSE..... 9,877.  
 PARKING..... 465.  
 POSTAGE AND SHIPPING..... 27,828.  
 PRINTING AND PUBLICATIONS..... 111,862.  
 RENT..... 29,509.  
 TAXES & LICENSES..... 1,020.  
 TELEPHONE..... 8,066.  
 TRAVEL..... 21,133.  
 UTILITIES..... 1,598.  
 TOTAL \$ 550,087.

**STATEMENT 4**  
**FORM 199, SCHEDULE L, LINE 12**  
**OTHER ASSETS**

DEPOSIT..... 2,700.  
 PREPAID EXPENSES AND DEFERRED CHARGES..... 70,023.  
 TOTAL \$ 72,723.

STATEMENT 5  
FORM 199, SCHEDULE L, LINE 18  
OTHER LIABILITIES

DEFERRED REVENUE .....	236,508.
TOTAL \$	<u>236,508.</u>

DRAFT

IN  
MAIL TO:  
Registry of Charitable Trusts  
P.O. Box 903447  
Sacramento, CA 94203-4470  
Telephone: (916) 445-2021

WEBSITE ADDRESS:  
<http://ag.ca.gov/charities/>

## ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code  
11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code Section 12586.1. IRS extensions will be honored.



<b>State Charity Registration Number</b> <u>0148331</u>	<b>Check if:</b> <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report
<b>JEWISH WORLD WATCH</b> Name of Organization	
<b>17514 VENTURA BLVD. #206</b> Address (Number and Street)	<b>Corporate or Organization No.</b> <u>2797942</u>
<b>ENCINO, CA 91316</b> City or Town State ZIP Code	<b>Federal Employer ID No.</b> <u>20-3406211</u>

### ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312) Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

#### PART A – ACTIVITIES

For your most recent full accounting period (beginning 1/01/08 ending 12/31/08) list:  
Gross annual revenue \$ 1,956,494. Total assets \$ 1,996,890.

#### PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer 'yes' to any of the questions below, you must attach a separate sheet providing an explanation and details for each 'yes' response. Please review RRF-1 instructions for information required.

	Yes	No
1 During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During this reporting period, did non-program expenditures exceed 50% of gross revenues?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If 'yes,' provide an attachment listing the name, address, and telephone number of the service provider.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 During this reporting period, did the organization hold a raffle for charitable purposes? If 'yes,' provide an attachment indicating the number of raffles and the date(s) they occurred.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Does the organization conduct a vehicle donation program? If 'yes,' provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Organization's area code and telephone number 818 501-1836

Organization's e-mail address TZIVIA@JEWISHWORLDDWATCH.ORG

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer

Printed Name

Title

Date