

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return	Please use IRS label or print or type. See Specific Instructions.	C Name of organization United Jewish Communities Inc		D Employer identification number 13-1624240
		Number and street (or P O box if mail is not delivered to street address) 111 Eighth Avenue No 11E	Room/suite	E Telephone number (212) 284-6500
		City or town, state or country, and ZIP + 4 New York, NY 100115201		F Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____


H	<i>and I are not applicable to section 527 organizations</i>	
H(a)	Is this a group return for affiliates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
H(b)	If "Yes" enter number of affiliates ▶	_____
H(c)	Are all affiliates included?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(If "No," attach a list See instructions)	
H(d)	Is this a separate return filed by an organization covered by a group ruling?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I	Group Exemption Number ▶ _____	
M	Check <input type="checkbox"/> if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)	

Organization type (check only one) ☒ 501(c) (3) ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than 25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **87,579,320**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)	
1	Revenue
2	Expenses
3	Changes in Net Assets or Fund Balances
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	

Revenue	1	Contributions, gifts, grants, and similar amounts received						
	a	Contributions to donor advised funds	1a					
	b	Direct public support (not included on line 1a)	1b		2,068,699			
	c	Indirect public support (not included on line 1a)	1c		39,527,921			
	d	Government contributions (grants) (not included on line 1a)	1d					
	e	Total (add lines 1a through 1d) (cash \$ <u>41,596,620</u> noncash \$ _____)				1e	41,596,620	
	2	Program service revenue including government fees and contracts (from Part VII, line 93) .				2	18,247,659	
	3	Membership dues and assessments				3	250,355	
	4	Interest on savings and temporary cash investments				4		
	5	Dividends and interest from securities				5	149,482	
	6a	Gross rents	6a					
	b	Less rental expenses	6b					
	c	Net rental income or (loss) subtract line 6b from line 6a				6c		
	7	Other investment income (describe ►)				7		
	8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other			
			26,435,318	8a				
	b	Less cost or other basis and sales expenses	22,910,609	8b				
	c	Gain or (loss) (attach schedule)	3,524,709	8c				
	d	Net gain or (loss) Combine line 8c, columns (A) and (B)				8d	3,524,709	
	9	Special events and activities (attach schedule) If any amount is from gaming , check here ► <input type="checkbox"/>						
	a	Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a					
b	Less direct expenses other than fundraising expenses	9b						
c	Net income or (loss) from special events Subtract line 9b from line 9a				9c			
10a	Gross sales of inventory, less returns and allowances	10a						
b	Less cost of goods sold	10b						
c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a				10c			
11	Other revenue (from Part VII, line 103)				11	899,886		
12	Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11				12	64,668,711		
Expenses	13	Program services (from line 44, column (B))				13	56,310,300	
	14	Management and general (from line 44, column (C))				14	9,193,927	
	15	Fundraising (from line 44, column (D))				15	1,992,979	
	16	Payments to affiliates (attach schedule)				16		
	17	Total expenses Add lines 16 and 44, column (A)				17	67,497,206	
Net Assets	18	Excess or (deficit) for the year Subtract line 17 from line 12				18	-2,828,495	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))				19	39,151,783	
	20	Other changes in net assets or fund balances (attach explanation) 				20	467,347	
	21	Net assets or fund balances at end of year Combine lines 18, 19, and 20				21	36,790,635	

Part II

Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b	Other grants and allocations (attach schedule) (cash \$ 8,511,062 noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22b	8,511,062	8,511,062	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25a	Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	25a	1,785,087	294,864	1,452,020
b	Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule)	25b			
c	Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26	Salaries and wages of employees not included on lines 25a, b and c	26	18,663,864	14,223,917	3,404,559
27	Pension plan contributions not included on lines 25a, b and c	27	1,442,943	1,025,003	342,129
28	Employee benefits not included on lines 25a - 27	28	2,824,121	2,013,380	661,589
29	Payroll taxes	29	1,724,829	1,225,242	408,966
30	Professional fundraising fees	30			
31	Accounting fees	31	148,240		148,240
32	Legal fees	32	340,089	234,434	92,087
33	Supplies	33	407,000	407,000	
34	Telephone	34	568,999	354,145	182,649
35	Postage and shipping	35	296,600	184,453	95,337
36	Occupancy	36	3,177,000	2,293,000	761,000
37	Equipment rental and maintenance	37			
38	Printing and publications	38	1,707,000	1,424,000	74,000
39	Travel	39	1,887,000	1,538,000	232,000
40	Conferences, conventions, and meetings	40	4,624,000	4,253,000	362,000
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule) ()	42	450,384	310,465	121,949
43	Other expenses not covered above (itemize)				
a	Missions	43a	12,129,065	12,129,065	
b	Prof & Consulting	43b	5,969,000	5,184,000	756,000
c	Educational and Evaluation	43c	278,000	278,000	
d	Other	43d	562,923	427,270	99,402
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	67,497,206	56,310,300	9,193,927

Joint Costs. Check ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ☒ **Yes** ☐ **No**

If "Yes," enter **(i)** the aggregate amount of these joint costs \$ _____, **(ii)** the amount allocated to Program services \$ _____, **(iii)** the amount allocated to Management and general \$ _____, and **(iv)** the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶	STRATEGIC GOALS & OUTCOMESUJC/the Federation of North America Our MissionUJC protects and enhances the well-being of Jews in North America, Israel and around the globe, striving to realize our core Jewish values of chesed(caring and compassion), Torah (Jewish learning), tzedakah (social justice)and tikkun olam (repairing the world) As the central address of the Jewish federation system, UJC acts on these values through philanthropic action, its strategic initiatives and its collective leadership, in partnership with communities and agencies on the local, national and international level	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		
a	See Additional Data Table	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
b		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
c		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e	Other program services (attach schedule)	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) . . . ▶	56,310,300

Part IV



Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.			(A) Beginning of year		(B) End of year		
Assets	45	Cash—non-interest-bearing		24,682,422	45	67,089,506	
	46	Savings and temporary cash investments		1,431,307	46	453,760	
	47a	Accounts receivable	47a	72,696,452			
	b	Less allowance for doubtful accounts	47b	3,666,211	72,178,456	47c	69,030,241
	48a	Pledges receivable	48a	8,781,541			
	b	Less allowance for doubtful accounts	48b	1,087,182	5,392,199	48c	7,694,359
	49	Grants receivable			49		
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a		
	b	Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)			50b		
	51a	Other notes and loans receivable (attach schedule)	51a	152,047			
	b	Less allowance for doubtful accounts	51b	64,909	88,100	51c	87,138
	52	Inventories for sale or use			52		
	53	Prepaid expenses and deferred charges		3,406,431	53	4,183,032	
	54a	Investments—publicly-traded securities <input checked="" type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		6,397,833	54a	2,475,742	
	b	Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		48,516,857	54b	64,418,288	
	55a	Investments—land, buildings, and equipment basis	55a	259,400			
	b	Less accumulated depreciation (attach schedule)	55b		260,500	55c	259,400
	56	Investments—other (attach schedule)		6,797	56	6,797	
	57a	Land, buildings, and equipment basis	57a	6,584,543			
	b	Less accumulated depreciation (attach schedule)	57b	5,085,510	1,515,529	57c	1,499,033
58	Other assets, including program-related investments (describe <input checked="" type="checkbox"/> _____)		1,232,285	58	317,840		
59	Total assets (must equal line 74) Add lines 45 through 58		165,108,716	59	217,515,136		
Liabilities	60	Accounts payable and accrued expenses		22,220,162	60	24,146,422	
	61	Grants payable			61		
	62	Deferred revenue		3,152,598	62	2,123,176	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63		
	64a	Tax-exempt bond liabilities (attach schedule)			64a		
	b	Mortgages and other notes payable (attach schedule)			64b		
	65	Other liabilities (describe <input checked="" type="checkbox"/> _____)		100,584,173	65	154,454,903	
	66	Total liabilities Add lines 60 through 65		125,956,933	66	180,724,501	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74						
	67	Unrestricted		24,401,783	67	22,772,000	
	68	Temporarily restricted		12,809,000	68	11,606,635	
	69	Permanently restricted		1,941,000	69	2,412,000	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74						
	70	Capital stock, trust principal, or current funds			70		
	71	Paid-in or capital surplus, or land, building, and equipment fund			71		
	72	Retained earnings, endowment, accumulated income, or other funds . .			72		
	73	Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)		39,151,783	73	36,790,635	
	74	Total liabilities and net assets / fund balances Add lines 66 and 73 . .		165,108,716	74	217,515,136	


a	Total revenue, gains, and other support per audited financial statements		a	451,619,000
b	Amounts included on line a but not on Part I, line 12			
1	Net unrealized gains on investments	b1	2,633,433	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify) <u>§5</u>	b4	384,348,077	
	Add lines b1 through b4		b	386,981,510
c	Subtract line b from line a		c	64,637,490
d	Amounts included on Part I, line 12, but not on line a			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) <u>§5</u>	d2	31,221	
	Add lines d1 and d2		d	386,981,510
e	Total revenue (Part I, line 12) Add lines c and d		e	64,668,711

a	Total expenses and losses per audited financial statements		a	422,875,000
b	Amounts included on line a but not on Part I, line 17			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify) <u> \$0 </u>	b4	355,409,015	
	Add lines b1 through b4		b	355,409,015
c	Subtract line b from line a		c	67,465,985
d	Amounts included on Part I, line 17, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) <u> \$0 </u>	d2	31,221	
	Add lines d1 and d2		d	31,221
e	Total expenses (Part I, line 17) Add lines c and d		e	67,497,206

[illegible]

<p>75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings <u>132</u></p> <p>b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)  .</p> <p>c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization"  .</p> <p>If "Yes," attach a statement that includes the information described in the instructions</p> <p>d Does the organization have a written conflict of interest policy?</p>			
	75b	Yes	
	75c		No
	75d	Yes	

[illegible]

76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		No
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		No
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		No
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a	Yes	
b	If "Yes," enter the name of the organization  See Additional Data Table _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
81a	Enter direct or indirect political expenditures (See line 81 instructions) 81a _____			
b	Did the organization file Form 1120-POL for this year?	81b		No

Part VIOther Information (continued)

YesNo

82a

Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?

82a

No

b

If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)

82b

83a

Did the organization comply with the public inspection requirements for returns and exemption applications?

83a

Yes

b

Did the organization comply with the disclosure requirements relating to quid pro quo contributions?

83b

Yes

84a

Did the organization solicit any contributions or gifts that were not tax deductible?

84a

No

b

If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

84b

85

501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?

85a

b

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

85b

If "Yes," was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year

c

Dues assessments, and similar amounts from members

85c

d

Section 162(e) lobbying and political expenditures

85d

e

Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices

85e

f

Taxable amount of lobbying and political expenditures (line 85d less 85e)

85f

g

Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?

85g

h

If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?

85h

86

501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12

86a

b

Gross receipts, included on line 12, for public use of club facilities

86b

87

501(c)(12) orgs. Enter a Gross income from members or shareholders

87a

b

Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)

87b

88a

At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX

88a

Yes

b

At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes, complete Part XI

88b

No

89a

501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911: 0, section 4912: 0, section 4955: 0

89b

No

b

501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction

89b

No

c

Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958: 0

89c

d

Enter: Amount of tax on line 89c, above, reimbursed by the organization

89d

e

All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?

89e

No

f

All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?

89f

No

g

For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

89g

No

90a

List the states with which a copy of this return is filed: See Additional Data Table

90b

238

91a

The books are in care of: Samuel Astrof Telephone no: (212) 284-6500

111 Eighth Avenue Suite 11E

Located at: New York, NY ZIP + 4: 100115201

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)?

91b

No

If "Yes," enter the name of the foreign country:

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

Form 990 (2006)

Part VI Other Information <i>(continued)</i>		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States?		91c Yes	
If "Yes," enter the name of the foreign country ▶ _____			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 —Check here ▶ <input type="checkbox"/>			
and enter the amount of tax-exempt interest received or accrued during the tax year ▶		92	

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Missions Meetings & Conferences					18,247,659
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					250,355
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	149,482	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	3,524,709	
101 Net income or (loss) from special events . . .					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a Misc Income			01	899,886	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				4,574,077	18,498,014
105 Total (add line 104, columns (B), (D), and (E)) ▶					23,072,091

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	UJC, as the national coordinating body for the Jewish federation system, organizes conferences and meetings to make policy decisions and provide services to member federations, and coordinates missions worldwide to help federations raise funds to meet needs
94	UJC,s National Federation/Agency Alliance allows federations to provide the base funding for nine Jewish nonprofit agencies

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
JFBP LLC 111 8th Ave Suite 11E New York, NY10011 35-2221732	10000 00 %	To facilitate issuance of tax-exempt bonds	92,965	0
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

NOTE: If "Yes" to **(b)**, file Form 8870 **and** Form 4720 (see instructions).

Part XI

Information Regarding Transfers To and From Controlled Entities

Complete only if the organization is a controlling organization as defined in section 512(b)(13)

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity				Yes	No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
Totals					

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity				Yes	No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
Totals					

108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?				Yes	No

Please 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 officer) is based on all information of which preparer has any knowledge				
	*****			2008-04-25	
	Signature of officer			Date	
	samuel astrof COO/CFO				
	Type or print name and title				

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 Loeb & Troper LLP 655 Third Avenue New York, NY 10017			EIN
				Phone no (212) 867-4000

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
United Jewish Communities Inc

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information—(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2006

Employer identification number
13-1624240

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Ronald Meier 111 8th Ave Suite 11E ny, NY 10011	SVP 40 00	296,797	39,053	0
Vicki Agron 111 8th Ave Suite 11E ny, NY 10011	SVP 40 00	290,000	83,157	0
Doron Krakow 111 8th Ave Suite 11E ny, NY 10011	SVP 40 00	219,300	16,548	0
Gail Reiss 111 8th Ave Suite 11E ny, NY 10011	VP 40 00	240,000	38,513	0
Barry Swartz 111 8th Ave Suite 11E ny, NY 10011	VP 40 00	231,000	73,486	0
Total number of other employees paid over \$50,000 ▶	148			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")


(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
X Communications NYCInc 636 Broadway 204 New York, NY 10012	Website Development	639,309
Michelle Tycher Stein 5925 Forest Lane 418 Dallas, TX 75230	Marketing Consultant	246,426
RabinowitzDorf 2852 Connecticut Ave NW Washington, DC 20008	Marketing Consultant	214,291
Measuring Success LLC 356 Western Ave 2 Cammbridge, MA 02139	Marketing Consultant	202,874
Terry Marks Associates 232 Cheyenne Drive Casa Robles, CA 93446	Marketing Consultant	170,300
Total number of others receiving over \$50,000 for professional services ▶	17	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
AVW-TelAv Audio Visual Solutions PO Box 650519 Dallas, TX 75265	Equipment Rental & set up	412,683
Cambridge Leadership Assoc 124 Mount Auburn St 200N Cambridge, MA 02138	Courses & Seminars	328,412
Freeman Companies 1600 Viceroy 100 Dallas, TX 75235	Displays Services	233,113
Benjamin Productions 60 East 8 Street 30N New York, NY 10003	Video Production Services	172,500
Collins Building Services 1775 Broadway 1420 New York, NY 10019	Building MaintServices	92,163
Total number of other contractors receiving over \$50,000 for other services ▶	9	

Part III **Statements About Activities** (See page 2 of the instructions.)

Yes **No**

1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ➤ <u>\$ 584,266</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)	1	Yes	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing property?	2a		No
b	Lending of money or other extension of credit?	2b		No
c	Furnishing of goods, services, or facilities?	2c		No
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 	2d	Yes	
e	Transfer of any part of its income or assets?	2e		No
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	3a		No
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		No
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3c		No
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		No
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a		No
b	Did the organization make any taxable distributions under section 4966?	4b		
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year ➤ _____			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ➤ _____			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ➤ <u>0</u>			
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ➤ <u>0</u>			

Part IV

Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5

☐

A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6

☐

A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7

☐

A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8

☐

A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9

☐

A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state
- 10

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b

☐

A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12

☐

An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13

☐

An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

☐ Type I

☐ Type II

☐ Type III - Functionally Integrated

☐ Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)					
(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total <div></div>					

- 14
- ☐
- An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A

Support Schedule

(Complete only if you checked a box on line 10, 11, or 12)

Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)		(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	59,385,318	39,838,344	39,478,986	39,493,543	178,196,191
16	Membership fees received	281,066	285,992	2,842,361	288,435	3,697,854
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	26,800,835	21,332,263	21,136,469	5,495,474	74,765,041
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	143,939	517,362	143,401	1,255,798	2,060,500
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21	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
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	921,658	627,995	699,705	65,708	2,315,066
23	Total of lines 15 through 22	87,532,816	62,601,956	64,300,922	46,598,958	261,034,652
24	Line 23 minus line 17	60,731,981	41,269,693	43,164,453	41,103,484	186,269,611
25	Enter 1% of line 23	875,328	626,020	643,009	465,990	
26	Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24				26a	3,725,392
b	Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts				26b	0
c	Total support for section 509(a)(1) test Enter line 24, column (e)				26c	186,269,611
d	Add Amounts from column (e) for lines 18 2,060,500 19 0 22 26 b 0				26d	4,375,566
e	Public support (line 26c minus line 26d total)				26e	181,894,045
f	Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f	9765 10 %
27	Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year (2005) (2004) (2003) (2002)					
b	For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2005) (2004) (2003) (2002)					
c	Add Amounts from column (e) for lines 15 16 17 20 21				27c	
d	Add Line 27a total and line 27b total				27d	
e	Public support (line 27c total minus line 27d total)				27e	
f	Total support for section 509(a)(2) test Enter amount from line 23, column (e)	27f				
g	Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g	
h	Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h	
28	Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					

Part V Private School Questionnaire (See page 7 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
32	Does the organization maintain the following	32a		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32b		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	32c		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32d		
d	Copies of all material used by the organization or on its behalf to solicit contributions?			
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to	33a		
a	Students' rights or privileges?	33b		
b	Admissions policies?	33c		
c	Employment of faculty or administrative staff?	33d		
d	Scholarships or other financial assistance?	33e		
e	Educational policies?	33f		
f	Use of facilities?	33g		
g	Athletic programs?	33h		
h	Other extracurricular activities?			
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group

Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	0
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	584,266
38	Total lobbying expenditures (add lines 36 and 37)	38	584,266
39	Other exempt purpose expenditures	39	66,881,719
40	Total exempt purpose expenditures (add lines 38 and 39)	40	67,465,985
41	Lobbying nontaxable amount Enter the amount from the following table— <div><div>If the amount on line 40 is—</div><div>The lobbying nontaxable amount is—</div><div>Not over \$500,00020% of the amount on line 40</div><div>Over \$500,000 but not over \$1,000,000\$100,000 plus 15% of the excess over \$500,000</div><div>Over \$1,000,000 but not over \$1,500,000\$175,000 plus 10% of the excess over \$1,000,000</div><div>Over \$1,500,000 but not over \$17,000,000\$225,000 plus 5% of the excess over \$1,500,000</div><div>Over \$17,000,000\$1,000,000</div></div>	41	1,000,000
42	Grassroots nontaxable amount (enter 25% of line 41)	42	250,000
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.			

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 13 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
46 Lobbying ceiling amount (150% of line 45(e))					6,000,000
47 Total lobbying expenditures	584,266	616,792	522,582	458,920	2,182,560
48 Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
49 Grassroots ceiling amount (150% of line 48(e))					1,500,000
50 Grassroots lobbying expenditures	0	0	0	0	0

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			
If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities			

Part VII

51

ब

- (i) Cash**

(ii) Other assets

b

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

C

d

	Yes	No
51a(i)		No
a(ii)		No
b(i)		No
b(ii)		No
b(iii)		No
b(iv)		No
b(v)		No
b(vi)		No
c		No

[illegible]

52.

└

b[illegible]

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2006

Attachment
Sequence No **67**

Name(s) shown on return United Jewish Communities Inc	Business or activity to which this form relates Cost of Goods Sold	Identifying number 13-1624240
--	---	--------------------------------------

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See the instructions for a higher limit for certain businesses	1	\$ 108,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	\$ 430,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6			
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	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 2007 Add lines 9 and 10, less line 12 .▶	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A		
17 MACRS deductions for assets placed in service in tax years beginning before 2006	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr	22	
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution:See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions)					
43 Amortization of costs that began before your 2006 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2006

Attachment
Sequence No **67**

Name(s) shown on return United Jewish Communities Inc	Business or activity to which this form relates Form 990 Page 2	Identifying number 13-1624240
--	--	--------------------------------------

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See the instructions for a higher limit for certain businesses	1	\$ 108,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	\$ 430,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6			
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	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 2007 Add lines 9 and 10, less line 12 .►	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	450,384

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A		
17 MACRS deductions for assets placed in service in tax years beginning before 2006	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ► <input type="checkbox"/>		

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr	22	450,384
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution:See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?						Yes No			24b If "Yes," is the evidence written?				Yes No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention		(h) Depreciation/ deduction		(i) Elected section 179 cost				
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25								
26 Property used more than 50% in a qualified business use														
		%												
		%												
		%												
27 Property used 50% or less in a qualified business use														
		%				S/L -								
		%				S/L -								
		%				S/L -								
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28								
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1								29						

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions)					
43 Amortization of costs that began before your 2006 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:

Software Version:

EIN: 13-1624240

Name: United Jewish Communities Inc

Form 990, Part III - Program Service Accomplishments:

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<div>a</div> <div>Campaign FRD - We support and implement the core values of United Jewish Communities - Tzedakah (Charity)tikkun O lam (repair of the world), and Kol Israel Arevim Zeh I"zeh (we are responsible for one another) - by artnering with communities to help maximize financial resources to meet the global human services ofthe Jewish people</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		16,505,391
<div>b</div> <div>Federation Services and Consulting-To help federations make substantive and lasting improvements in their performance so they can more effectively build community and develop financial resources</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		8,382,424
<div>c</div> <div>Israel Office and Missions (O versight of humanitarian programs overseas , fact finding trips to identify & evaluate needs & allocations to service providers)</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		15,704,865
<div>d</div> <div>Professional & Volunteer Development (Recruit and train leadership personnel for the federation system)</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		3,407,879
<div>e</div> <div>Israel and Overseas/Management of allocations to overseas providers</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		2,337,807
<div>f</div> <div>Grants to agencies for humanitarian purposes</div> <div>(Grants and allocations \$ 8,511,062)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		8,511,062
<div>g</div> <div>Institutional Advancement-Securing of private funding for new initiatives</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		384,520
<div>h</div> <div>Jewish education & cultural programming & consulting</div> <div>(Grants and allocations \$)</div> <div>If this amount includes foreign grants, check here <input type="checkbox"/></div>		1,076,352

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Howard Rieger 111 Eighth Avenue Suite 11E New York, NY 10011	President CEO 40 00	555,000	44,503	166,090
Samuel Astrof 111 Eighth Avenue Suite 11E New York, NY 10011	Chief Financial OfficerCO 40 00	298,000	30,739	0
Gerald Carter 111 Eighth Avenue Suite 11E New York, NY 10011	Asst Secy 40 00	126,291	12,748	0
Robert Hyman 111 Eighth Avenue Suite 11E New York, NY 10011	Asst Secy 40 00	231,820	18,415	0
Jonathan Lichter 111 Eighth Avenue Suite 11E New York, NY 10011	Asst Secy 40 00	116,500	16,500	0
Pamela Zaltsman 111 Eighth Avenue Suite 11E New York, NY 10011	Asst Secy 40 00	164,225	4,256	0
Joseph Kanfer c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Chair Board of Trustees 1 00	0	0	0
Kathy E Manning c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Chair Executive committee 1 00	0	0	0
David Fisher c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	National Campaign Chair 1 00	0	0	0
Michael C Gelman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Treasurer 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
David Steirman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Assistant Treasurer 1 00	0	0	0
Susan K Stern c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Secretary 1 00	0	0	0
Bennett Aaron c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Alan Ades c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Gary Aidekman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Joel Alperson c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Peter Alter c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Lawrence Altschul c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Bruce Arbit c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Harvey J Barnett c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Allan Baumgarten c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Saby Behar c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Sharon Bell c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Mandell Berman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Frank Block c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Wendy Block c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Herschel Blumberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Michael Bohnen c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Nancy Brenner c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Donald Brody c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Charles R Bronfman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David Burstin c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Shoshana Cardin c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Chuck Cohen c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Leonard Cole c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Robert Cutler c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Rabbi Harry K Danziger c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Jeffrey Davidowitz c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Claire Ellman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David Engel c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Raymond Epstein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David M Farber c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Jake Farber c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Susan Farber c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Dede Feinberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Iris Feinberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Genine Fidler c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Irwin Field c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Cheryl Fishbein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David Fisher c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Marc Fisher c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Robyn Fisher c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Doris Fogel c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Howard Friedman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Michael Fromm c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Eli N Futerman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David Garfinkle c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Rani Garfinkle c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Conrad Giles c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Herb Gimelstob c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Cora Ginsberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Billie Gold c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Marc Gold c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Robert Goldberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Jane Goldstein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Charles Goodman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Cass Gottlieb c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Alexander Grass c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Sheila Greenbaum c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Robert Grey c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Harley Gross c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Stewart Harris c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Leslie Held c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Kenneth R Heyman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
I Bradley Hoffman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Michael Horowitz c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Arthur Jablon c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Kenneth Kaiserman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Mitchell Kaliff c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Richard Kann c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Edward Kaplan c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Irene Kaplan c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Stewart Kasen c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Arlene Kaufman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Jody Kaufman Loewenstein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Barbara G Kay c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Beth Kieffer Leonard c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Joseph Kirshenbaum c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Leonard L Kleinman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Ann-Louise Klepper c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Lori Klinghoffer c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Martin Kogon c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Mornton Kornreich c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David Koschitzky c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Myra Kraft c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Richard Krugel c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Robert Kuchner c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Frank Lautenberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Michael Lebovitz c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Marvin Lender c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Jordan Levy c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Ann Licht c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Norman Lipoff c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Arthur Loring c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Robert Loup c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Edward Lyons c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Morton L Mandel c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Rob Mann c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Lew Margolis c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Michael Nissenson c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Gail Norry c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Morris W Offit c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Adrienne Offman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Julie Wise Oreck c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Karen Pack c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Richard Pearlstone c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Kenneth D Polin c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Esther Polland c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Heschel Raskas c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Albert Ratner c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Charles Ratner c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Shepard Remis c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Judy R Robins c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Lester Rosenberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Ron Rosensweig c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Neil Ross c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Larry Schoenbrun c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Steven Schottenstein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Elaine Schreiber c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Jodi J Schwartz c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Diane Seder c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
S Stephen Selig c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Midge Shafton c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Maxine Shapiro c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Steve Shapiro c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Sandra Sheinbein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Jane Sherman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Bruce Sholk c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Blossom Siegel c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Beryl Simonson c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Edgar Snyder c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Carole A Solomon c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Alan Solow c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Joelle Steefel c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
David Steirman c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Herbert B Stern c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Susan K Stern c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Henry Taub c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Joel D Tauber c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
James S Tisch c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Patricia Uhlmann c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Richard Vineberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Richard Vineberg c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Elliott Weinstein c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Diane Wetchler c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Richard R Wexler c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Mark Wilf c/o UJC 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Joe Williams 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Maynard Wishner 111 Eighth Avenue Suite 11E New York, NY 10011	trustee 1 00	0	0	0
Jerry Yanowitz 111 Eighth Avenue Suite 11E New York, NY 10011	trustee 1 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Ed Young 111 Eighth Avenue Suite 11E New York, NY 10011	trustee 1 00	0	0	0
Toni Young 111 Eighth Avenue Suite 11E New York, NY 10011	trustee 1 00	0	0	0
Fred Zimmerman 111 Eighth Avenue Suite 11E New York, NY 10011	Trustee 1 00	0	0	0
Garry Zlotnik 111 Eighth Avenue Suite 11E new York, NY 10011	trustee 1 00	0	0	0

Form 990, Part VI, Line 80b - If "Yes", enter the name of the organization and whether it is exempt or nonexempt:

Name of the Organization	Exempt	Nonexempt
United Israel Appeal Inc	X	
JFBP LLC	X	
The Trust for Jewish Philantropy	X	

Form 990, Part VI, Line 90a - List the states with which a copy of this return is filed:

List the states with which a copy of this return is filed	AL, AS, AR, CA, CO, CT, FL, GA, IL, KS, KY, MA, MD, MI, MN, MS, NH, NJ, NM, NM, WI, NC, ND, OH, OK, OR, PA, RI, SC, WA, TN, UT, VA, WV
---	--

TY 2006 Cash Grants Paid Schedule**Name:** United Jewish Communities Inc**EIN:** 13-1624240

Class of Activity	Recipient's name	Address	Amount	Relationship
Hurricane Katrina	New Orleans Federation	3747 West Esplanade Avenue Metairie, LA 70009	5,496,687	
Hurricane Katrina	Jewish Fedof Houston	5603 So Braeswood Blvd Houston, TX 77096	10,791	
Hurricane Katrina	Hillel	800 Eighth Street NW Washington, DC 20001	175,000	
Hurricane Katrina	Jewish Fed of Baton Rouge	3354 Kleinert Ave Baton Rouge, LA 70806	250,000	
Hurricane Katrina	Jewish Fund for Justice	330 Seventh Ave New York, NY 10001	450,000	
Hurricane Katrina	Congregation Beth Israel	PO Box 7156 Gulfport, MS 39506	99,000	
hurricane Katrina	israel trauma coalition	po box 3900 jerusalem, IS	306,350	
Hurricane Katrina	Mt Sinai Medical Center	One Gustave Levy Pl New York, NY 10029	88,482	

Class of Activity	Recipient's name	Address	Amount	Relationship
Hurricane Katrina	New York Board of Rabbis	136 East 59th Street New York, NY 10016	171,100	
Hurricane Katrina	Kaboom Operation Playground	4455 Connecticut Washington, DC 20008	120,000	
Hurricane Katrina	Nechhama - Jewish response	4330 S Cedar Lark Road St Louis Park, MN 55416	62,476	
Hurricane Katrina	Jewish Fed Of Peoria	2000 Pioneer Parkway Peoria, IL 61615	1,400	
Hurricane Katrina	Beth Shalom Synagogue	9111 Jefferson Highway Baton Rouge, LA 70809	11,000	
Hurricane Katrina	Hurricane Fund for Elderly	7333 Paragon Road Dayton, OH 45459	400,000	
Hurricane Katrina	Mental Health Association of Miss	4803 Harrison Circle Gulfport, MS 39506	126,600	
Hurricane Katrina	Katrina Books	111 Eight Ave New York, NY 10011	49	

Class of Activity	Recipient's name	Address	Amount	Relationship
JDC Allocation	American Joint Distribution	711 Third Ave New York, NY 10017	231,885	
JDC Allocation	American Joint Distribution	711 Third Ave New York, NY 10017	20,000	
UJC Endowment	Venture Fund	111 Eighth Ave New York, NY 10011	50,000	
UJC Endowment	Denver Federation	300 S Dahlia St Denver, CO 80246	70,000	
UJC Endowment	Birthright Israel	521 Fifth Avenue New York, NY 10175	26,000	
Data Bank	Univ of Connecticut	405 Babbidge Rd Storrs Mansfield, CT 06269	41,806	
Disaster Relief Fund	New York Board of Rabbis	136 East 39th Street New York, NY 10016	12,820	
Disaster Relief Fund	Jewish Fed Of Volussia	470 Andalussia Flagelr Counties Ormond Beach, FL 32174	15,570	

Class of Activity	Recipient's name	Address	Amount	Relationship
Disaster Relief Fund	Jewish Fed Of Greater Seattle	2031 Third Avenue Seattle, WA 98121	50,000	
Disaster Relief Fund	Jewish Fed Of Greater Kansas	5801 W 115th St Overland Park, KS 66211	5,000	
Disaster Relief Fund	Birmingham Jewish Fed	3966 Montclair Road Birmingham, AL 35213	5,000	
Disaster Relief Fund	Hillel Virginia Tech	PO Box 708 Blackburgh, VA 24063	10,000	
Library Fund	Gift to YLC C0chairs	111 Eight Ave New York, NY 10011	571	
Ferep Grants	Baltimore Hebrew University	5800 Park Heights Ave Baltimore, MD 21215	16,785	
Ferep Grants	New York University	7 East 12th Street New York, NY 10003	70,000	
Ferep Grants	Brandies University	415 South Street Waltham, MA 02451	20,000	

Class of Activity	Recipient's name	Address	Amount	Relationship
Ferep Grants	University of Maryland	1000 Hilltop Circle Baltimore, MD 21250	4,632	
Ferep Grants	University of Michigan	PO Box 77000 Detroit, MI 48277	20,000	
Ferep Grants	Hebrew Union College	3077 University Ave Los Angeles, CA 90007	40,000	
Ferep Grants	University of Judaism	15600 Mulholland Drive Bel Air, CA 90077	20,000	
Ferep Grants	University of Baltimore	1420 North Charles Street Baltimore, MD 21201	12,058	

TY 2006 Gain/Loss from Sale of Public Securities Schedule**Name:** United Jewish Communities Inc**EIN:** 13-1624240**Gross Sales Price:** 26,435,318**Basis:** 22,910,609**Sales Expenses:** 0**Total (net):** 3,524,709

TY 2006 General Explanation Attachment

Name: United Jewish Communities Inc

EIN: 13-1624240

Identifier	Return Reference	Explanation
detail of compensation for how ard rieger	form 990, part v-a, statement 17	compensation to how ard rieger includes expenses totaling \$166,090, of w hich \$150,000 is to defray cost of performance of duties in New York City

TY 2006 Investments - Other Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Book Value	Cost/FMV
Life insurance Policies	4,322	C
Misc	2,475	C

TY 2006 Investments - Securities Schedule**Name:** United Jewish Communities Inc**EIN:** 13-1624240

Description	Book Value	Cost/FMV
Mutual Funds	33,132,956	F
Alternative Investments	20,938,516	F
Corporate stock	1,980,856	F
US Treasury	494,886	F
Fixed Income	5,812,330	F
Money Market	4,196,855	F
Other	337,631	F

TY 2006 Land etc. Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Equipment FurnituresVideo & Data Processing Equipment	6,584,543	5,085,510	1,499,033

TY 2006 Other Assets Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Beginning of Year Amount	End of Year Amount
Intercompany receivables with UIA	1,186,118	317,673
Intangible pension assets	46,167	167

TY 2006 Other Changes in Net Assets Schedule**Name:** United Jewish Communities Inc**EIN:** 13-1624240

Description	Amount
Unrealized gain on sale of securities	2,633,433
Pension curtailment income	-2,289,086
Additional minimum pension liability	123,000

TY 2006 Other Expenses Included Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Amount
Expenses of United Israel Appeal Inc	355,409,000
Misc	15

**TY 2006 Other Expenses
Not Included Schedule**

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Amount
Prior year grant reversal	31,221

TY 2006 Other Liabilities Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Beginning of Year Amount	End of Year Amount
Amounts held for others	100,584,173	154,454,903

TY 2006 Other Revenues Included Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Amount
Revenue of United Israel Appeal Inc Affiliated entity	384,349,000
Misc	-923

**TY 2006 Other Revenues
Not Included Schedule**

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	Amount
Prior year grant reversal	31,221

TY 2006 Relationship Schedule**Name:** United Jewish Communities Inc**EIN:** 13-1624240

Person Name / Business Name	Title or Role	Person Name 2 / Business Name 2	Title or Role 2	Relationship
David Fisher	Trustee	Marc Fisher	Trustee	Brothers
Wendy Block	Trustee	Frank Block	Trustee	Married
Irene Kaplan	Trustee	Edward Kaplan	Trustee	Married
Fred Zimmerman	Trustee	Sharon Bell	Trustee	Married

TY 2006 Other Income Schedule

Name: United Jewish Communities Inc

EIN: 13-1624240

Description	2003	2002	2001	2000	Total
Other income	921,658	627,995	699,705	65,708	2,315,066