990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

<u>A</u> _	For the	e 2014 ca	lendar year, or tax year beginning //1/2014 , a	ind end	ding 6/3	0/2015			
В	Check if a	applicable	C Name of organization A Jewish Voice for Peace		D Employer	identification	ı number		
	Address	change	Doing business as						
\Box	Name ch	222	Number and street (or P O box if mail is not delivered to street address) Room/su	ute	90-0018359				
믐	Maine Gi	ange	1611 Telegraph Avenue 1020		E Telephone	number			
Ш	Initial retu	ım	City or town State ZIP code		(510) 465-1	777			
П	Final return	/terminated	Oakland CA 94612						
믐			Foreign country name Foreign province/state/county Foreign	postal co			2.507	EDC	
Ш	Amended	d return			G Gross rec	apts \$	2,597		
	Application	on pending	F Name and address of principal officer	- Н	H(a) Is this a group return t	or subordinates	∘ Yes X	No	
			Rebecca Vilkomerson, same as above	⊦	H(b) Are all subordinate	es included?	Yes	No	
	Tax-exem	nt status		527	If "No," attach a lis	it (see instruc	tions)	_	
_	Website		[X 55 ((5)(5)	\rightarrow					
					H(c) Group exemption i				
_		rganization	X Corporation Trust Association Other ▶	L Year	of formation 2001	M State of	f legal domicile	CA	
F	art I	Sui	mmary						
•	1	Briefly d	escribe the organization's mission or most significant activities	Advoc	ating for just polic	ies in the U	JS with		
ဋ		regard to	o Israel/Palestine						
'n						7			
Š	2	Check tl	his box $lacktriangle$ if the organization discontinued its operations or disposition	sed of	f more than 25%	of its net as	sets		
ဖိ	3		of voting members of the governing body (Part VI, line 1a)	<u>'ئسا</u>		∖ 3		11	
<u>ಇ</u>	4		of independent voting members of the governing body (Part VI, line)	1b)	મુખ્ય _{કે} છે જુ	\4 \		11	
Ě	5		mber of individuals employed in calendar year 2014 (Part V, line 2á)	W.	4 J 0 5019	5_		31	
Activities & Governance	6		mber of volunteers (estimate if necessary)	1 "		6		300	
Ac	7a		related business revenue from Part VIII, column (C), line 12		شنان الم	-7a-		0	
	ь		elated business taxable income from Form 990-T, line 34	\subseteq	سننسنسنسنس	7b		0	
	T -				Prior Year		Current Year		
Revenue	8	Contribu	itions and grants (Part VIII, line 1h)		1,407	7.148	2,485	,928	
	9		n service revenue (Part VIII, line 2g)			5,228		,201	
Š	10	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)			2,186		578	
ď	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			9,899	10	,947	
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,424		2,596	•	
	13		and similar amounts paid (Part IX, column (A), lines 1–3)			, , , , , , , , , , , , , , , , , , , ,		0	
	14		paid to or for members (Part IX, column (A), line 4)					0	
s	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		65.	1,073	1,141,568		
Se	16a		onal fundraising fees (Part IX, column (A), line 11e)			3,035		0	
Expenses	ь		ndraising expenses (Part IX, column (D), line 25) > 275,	967	`w, •	. 4 v	, f a		
Ж	17		openses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>'</u>	489	9,971	1,003	426	
	18		penses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,144		2,144		
	19		e less expenses Subtract line 18 from line 12			0,382		.660	
٠ .				- 	Beginning of Current		End of Year	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ssets or	20	Total as	sets (Part X, line 16)		-	5,372	1,274	.685	
A S	21		bilities (Part X, line 26)			5,231		,884	
Net As	22		ets or fund balances Subtract line 21 from line 20			9.141	1,160		
	art II		nature Block					,	
			y, I declare that I have examined this return, including accompanying schedules and stater	ments, a	and to the best of my kn	owledge			
and	belief, it i	s true, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of	f which p	oreparer has any knowl	edge			
Si	gn		M						
	ere	_	Signature of officer Reham Vilkowe	rsov	Date Date	س. ۱ س	١.		
•••			Signature of officer Referra VIIta Ma	CO 1	HVE DIMME	5/15	116		
			Type or print name and title	· · · · ·	<i></i>	· · · · · · · · · · · · · · · · · · ·	-		
_		Pnn	VType preparer's name Preparer's signature	' //	Date	back 🗀 .	PTIN		
Pa		l _{Doi}	iglas E Cook, CPA/MPA	X		heck ıf elf-employed	P01521705		
	eparer								
Us	e Only	, –	ts name ► Cook & Company, A Professional Accountancy Corp		Firm's EIN ►				
			's address ▶ 870 Market Street, Suite 880, San Francisco, CA 94102		Phone no	(415) 621-			
Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions)				Yes _	No	
							A	_	

990 (2014)

Form 99	0 (2014)	A Jewish Voice for Peace	90-0018359	Page 2
Par	t III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		
		describe the organization's mission		
	Advocat	ting for just policies in the US with regard to Israel/Palestine		
	·			
2	Did the	organization undertake any significant program services during the year which were not listed on		_
		r Form 990 or 990-EZ?	Yes	X No
		describe these new services on Schedule O		
		organization cease conducting, or make significant changes in how it conducts, any program	—	
	services		∐ Yes	X No
		" describe these changes on Schedule O he the organization's program service accomplishments for each of its three largest program servic	res as measured by	
		es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and		
		l expenses, and revenue, if any, for each program service reported		
	(Code) (Expenses \$ 1,664,226 including grants of \$) (Reversed training, leadership development, campaign support and other support as needed to 62	nue \$ 99	,201)
	1) Prov			
	other su			
•	artists, a	upport as needed to our non-geographic professional councils (rabbis, students, labor, academics) 3) Disseminated educational materials about Israel/Palestine via Facebook,		
	Twitter,	Youtube, and email		
4b	(Code) (Expenses \$ including grants of \$) (Reve		
		••		
•				
•				
-				
-				
4c	(Code) (Expenses \$ including grants of \$) (Reve	nue \$)
		••••••		
	·	•••		
•		•••••••••••••••••••••••••••••••••••••••		
-				
-				
-				
		rogram services (Describe in Schedule O)		
	(Expens		0_)	
4e	Total pro	ogram service expenses • 1,664,226		

art	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			_
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			.,
10	negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	3	
• •	VII, VIII, IX, or X as applicable	g., 90	* . 8	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	. "	S	
	Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_	Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII			
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	12a	Х	
D	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		¦	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
4.0	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	ا ا		.,
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		<u> </u>
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	4-,	ł	v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	۲۳		
	If "Yes," complete Schedule G, Part III	19	1	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
h	If "Ves" to line 20a, did the organization attack a copy of its guidated financial statements to this return?	206	$\neg \neg$	

19? Note. All Form 990 filers are required to complete Schedule O

	Challist of Paguind Shadular (continued)	30-00 10353		aye -
Par	t IV Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		165	140
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	- 		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			l
	24b through 24d and complete Schedule K If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	-		[
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			١.,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	[.]		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	201		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		┝
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23		 ^
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	"		Ĥ
	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlle	d		1
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1	1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		ł	

		016359		age 🤿
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	21		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		l
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7		
	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	31		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X_	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		1	
	account)?	4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country	.		Ĵ
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts	,		
	(FBAR)		ļ	- ·
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	!	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	↓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	↓	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		1	
_	gifts were not tax deductible?	6b	 	—
7	Organizations that may receive deductible contributions under section 170(c).	27	١.	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
_	and services provided to the payor?	7a	-	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	├ ──	├
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	١_		
	required to file Form 8282?	7c	ļ .	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	 	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	 	 ^
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>g</u> 7h	 	├
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/**	<u> </u>	-
•	sponsoring organization have excess business holdings at any time during the year?	8	Ž.	
9	Sponsoring organizations maintaining donor advised funds.	1	 	9%
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	1	\vdash
10	Section 501(c)(7) organizations. Enter	3.7		
а	Initiation fees and capital contributions included on Part VIII, line 12			١.
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	- }		
11	Section 501(c)(12) organizations. Enter	7.		ľ
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		`′	1
	against amounts due or received from them)].		ç
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Ì	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	<u>L</u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		Π	
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	İ
	the organization is licensed to issue qualified health plans	_		
С	Enter the amount of reserves on hand		<u>L</u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 9	90 (2014) A Jewish Voice for Peace	90-0018	8359	Р	age 6				
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be	low, and for a	a "No	7					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in So	hedule O. Se	e insi	ructio	ons.				
	Check if Schedule O contains a response or note to any line in this Part VI				X				
Sect	ion A. Governing Body and Management								
				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 11								
	If there are material differences in voting rights among members of the governing body, or								
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O								
b	Enter the number of voting members included in line 1a, above, who are independent 1b	11							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with								
_	any other officer, director, trustee, or key employee?		2	Χ					
3	3 Did the organization delegate control over management duties customarily performed by or under the direct								
•	supervision of officers, directors, or trustees, or key employees to a management company or other person		3		х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4	Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х				
6	Did the organization have members or stockholders?		6	Х	-^-				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		-						
, a	one or more members of the governing body?		70	х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		7a						
D	stockholders, or persons other than the governing body?		76	~					
			7b	Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during								
_	the year by the following The governing body?			<i>~</i>					
a			8a	X					
b	Each committee with authority to act on behalf of the governing body?		8b						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached								
Saat	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	١	<u> </u>				
Seci	ion B. Policies (This Section B requests information about policies not required by the Interna	Revenue C	oae) Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a	X	NO				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters		iva						
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		406	v					
11a			10b 11a	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	ne ionn?	па						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		42-	·					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use	to conflicte?	12a 12b	X					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	.o comicis,	120						
C	describe in Schedule O how this was done		42-						
13	Did the organization have a written whistleblower policy?		12c 13	X	Х				
14	Did the organization have a written document retention and destruction policy?								
15	·		14	X					
15	Did the process for determining compensation of the following persons include a review and approval by				, ,				
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and dec	Sion	45-						
a	The organization's CEO, Executive Director, or top management official		15a	Χ_	-				
b	Other officers or key employees of the organization		15b		X				
46-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement								
1-	with a taxable entity during the year?		16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its								
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard				1				
04	the organization's exempt status with respect to such arrangements?		16b						
	ion C. Disclosure	NV 05 5							
17	List the states with which a copy of this Form 990 is required to be filed CA, DC, IL, MA, MD, NJ,								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sec	tion 501(c)(3):	s only	')					
	available for public inspection. Indicate how you made these available. Check all that apply								
40	Own website Another's website X Upon request Other (explain in								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of	न interest polic	cy, an	ď					
20	financial statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's books ar		•						
	Liz Ingenthron 51	0-465-1777							
	1611 Telegraph Avenue Suite 1020, Oakland, CA 94612								

•												
Form 990 (2014)	A Jewish Voice for Peace									90-00183	859 Page 7	
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated											
	Employees, and Independent C											
	Check if Schedule O contains a r	esponse or no	te to	an	y lır	ne II	n this	Pa	art VII		· · <u>L</u>	
Section A.	Officers, Directors, Trustees, Key E	mployees, and	High	est	Cor	npe	nsate	ed E	mployees			
1a Complete to organization's	this table for all persons required to be	listed Report co	mper	nsati	on 1	for t	he ca	lend	dar year ending v	with or within the		
•	of the organization's current officers, d	rectore truetees	· (who	atho	rını	divid	luale	or 0	raanizatione) ro	gardless of amo	unt	
of compensati	ion Enter -0- in columns (D), (E), and (F) if no compens	sation	wa	s pa	aid					unt	
	of the organization's current key emplo organization's five current highest con)voo)	
	reportable compensation (Box 5 of For										yee,	
	and any related organizations	in iv 2 and or 5	<i>J</i>	,, , ,	,,,,,			,	or more than \$1			
List all controls	of the organization's former officers, ke eportable compensation from the organ							ed e	employees who r	eceived more th	an	
	of the organization's former directors	-			-			itv :	as a former direc	tor or trustee of	the	
	more than \$10,000 of reportable compe										uie	
List persons in	n the following order individual trustees		_						•			
<u> </u>	employees, and former such persons											
Check thi	s box if neither the organization nor an	y related organiz T	ation	cor			ted a	ny c	urrent officer, dir	ector, or trustee	·	
						C)						
	(A)	(B)	(do i	not ch		ition more	than o	ne	(D)	(E)	(F)	
	Name and Title	Average box, unless person is both an hours per officer and a director/trustee)							Reportable	Reportable	Estimated	
		week (list any		T -	7	_	_	_	compensation from	compensation from related	amount of other	
		hours for related	d vic	State	Officer	ey e	맞음	Former	the organization	organizations (W-2/1099-MISC)	compensation from the	
		organizations	Individual trustee or director	Institutional	ੈ	Key employee	st a	"	(W-2/1099-MISC)	(***-271033-141100)	organization	
		below dotted line)	rus	# #		oyee) j	ŀ			and related organizations	
		,	lee	trustee			Highest compensated employee				organizations	
				•			i e					
(1) Jethro I	isenstein	7 00										
Chair		0 00	Х		Х				0	0	0	
(2) Cindy C	Greenberg	5 00]			
Vice Chair		0 00	X		X		<u> </u>		0	0	0	
(3) Karen A	Ackerman	5 00	i									
Treasurer	J	0 00	_		Х		ļ	_	0	0	0	
(4) Lev Hirs	schhorn	3 00							ļ			
Secretary	***	0 00		┢	X	_		ļ	0	0	0	
(5) Beth Ha		3 00	1							_	_	
Board Membe		0 00		┝	-		├	 	0	0	0	
(6) Donna Board Membe		3 00		ļ.							_	
(7) Glen Ha		0 00 3 00				-	├	├	0	. 0	. 0	
Board Membe		0 00					ŀ		0	0	0	
(8) Grace L		3 00		-				\vdash			<u> </u>	
Board Membe		0 00	1						0	0	0	
(9) James		3 00						┢─	·			
Board Membe		0 00							0	0	o	
	ında Holtzman	3 00			Т	Т		I	<u>~</u>			
Board Membe		0 00			ŀ		1		٥ ا	o	o	
(11) Rebecc	a Subar	3 00	_	Π	1				<u> </u>			
Board Membe		0 00	1		1		1		0	0	0	
	a Vilkomerson	60 00		Π								
Executive Dire	ector	0 00		L	x			L	80,292	0	312	

312

P	art VII Section A. Officers, Directors, Tru	ustees, Key Em	ploye	es,	and	j Hi	ghes	t C	ompensated Em	ployees (conti	าued)		
	(A) Name and title	(B) Average hours per	(C) Position (do not check more than of box, unless person is both officer and a director/trust					an ee)	(D) Reportable compensation	(E) Reportable compensation			
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	org	other inpensati from the ganization relate ganization g	on ed
(15)													
(16)						-							
(17)													
(18)													
(19)													
(20)			-	ļ									
(21)													
(22)													
(23)													
(24)						ļ							
(25)													
1b c	Sub-total Total from continuation sheets to Part VII, Se	ection A		1				>	80,292	(+		312
d	Total (add lines 1b and 1c)							•	80,292	(_		312
2	Total number of individuals (including but not lire reportable compensation from the organization		sted a		e) v 0	vho	rece	ved		,000 of			
3	Did the organization list any former officer, dire		kev e	mn	ove		r hia	hae	t compensated			Yes	No
•	employee on line 1a? If "Yes," complete Sched				Oye	.c, c	ı ıng	1103	t compensated		3		X
4	For any individual listed on line 1a, is the sum of	of reportable con	npens	satio	n a	nd c	ther	con	npensation from				ý)
	the organization and related organizations great	iter than \$150,00	00? If	"Υ <i>ϵ</i>	s, "	com	plete	Sc	chedule J for sucl	ר			,. w
_	ındıvıdual										4	┼─┤	Х
5	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye									idual	5		~
	tion B. Independent Contractors												
1	Complete this table for your five highest compe compensation from the organization Report co year										tax		
	(A) Name and business add	ress							(B) Description of serv	vices	(C Compe		
													0
								\vdash					0
								\vdash					<u>0</u> 0
													0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the		ted to	tho	se l	ste	abo 0	ve)	who received	*	>		

Part VIII Statement of Revenue

		Check if Schedule O contains	s a response or	note to any line in	n this Part VIII			
:					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
हा र	1a	Federated campaigns	15	0		ŀ		
rant	b	Membership dues	11	0]			
S, G	С	Fundraising events	10	24,966				
ar A	d	Related organizations	10	0				
S, E	е	Government grants (contribution	is) 16	9 0				
tion er S	f	All other contributions, gifts, gran	nts, and		1			
를 를		similar amounts not included abo	ove 1	f 2,460,962				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in l	lines 1a-1f: \$	0	1			
	h	Total. Add lines 1a-1f		•	2,485,928		,	` 3
16				Business Code				
/eur	2a	Program Fees		900099	97,729	97,729		
Re.	b	Other Earned Income		900099	1,472	1,472	·	
ice	С				0			
Ser.	d				0			
Ē	е				0			
Program Service Revenue	f	All other program service revenu	ie		0			
<u>4</u>	g	Total. Add lines 2a-2f		•	99,201		~	
	3	Investment income (including div	vidends, interes	t, and				1
		other similar amounts)		•	578			578
	4	Income from investment of tax-e	xempt bond pro	ceeds	0			
	5	Royalties		▶ 1	0			
			(ı) Real	(II) Personal	*	, ,		
	6a	Gross rents	4,33	4		, i	•	
	b	Less rental expenses						_ ~
	С	Rental income or (loss)	4,33	4 0			<u> </u>	
	d	Net rental income or (loss)			4,334	4,334		
	7a	Gross amount from sales of	(i) Secunties	(II) Other	. 4		, ,	**, * \$
		assets other than inventory		0 0		×		
	b	Less cost or other basis			Ì			
		and sales expenses		0 0	j			
	С	Gain or (loss)		0 0	<u>` </u>		, , , , , , , , , , , , , , , , , , , ,	
- 1	d	Net gain or (loss)		<u></u>	0			
evenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line	24,966 1c)			,		8
Other R		See Part IV, line 18	а	0		` ***	Ç	2
ا ئو ا	b	Less direct expenses	b		1			
ŏ	С	Net income or (loss) from fundra	ising events	•	-872			-872
	9a	Gross income from gaming activ	•					
		See Part IV, line 19	а	0	~	· ·	**	
ł	b	Less direct expenses	b	0			Ť	
	С	Net income or (loss) from gaming	g activities	>	l			*** *** **** **
		Gross sales of inventory, less	•					
		returns and allowances	а	l o				
l	b	Less cost of goods sold	b	0		`		* * * * * * * * * * * * * * * * * * *
	С	Net income or (loss) from sales of	of inventory	▶	0			
		Miscellaneous Revenue		Business Code				
	11a	Miscellaneous Income		900099	7,485		~ - · · · · · · · · · · ·	7,485
	b				0			
	С				0			
- 1	d	All other revenue	***************************************		0			
	е	Total. Add lines 11a-11d		•	7,485			
	12	Total revenue. See instructions		•	2 596 654	103 535		7 191

Part IX Statement of Functional Expenses

Secu	Check if Schedule O contains a response or note			этрівів соштіп (А)	
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				•
	domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic				,
	individuals See Part IV, line 22	0			· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				į
	individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	84,619	59,233	8,462	16,924
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0		<u> </u>	
7	Other salaries and wages	852,135	670,674	74,451	107,010
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	112,411	87,402	11,127	13,882
10	Payroll taxes	92,403	70,663	10,053	11,687
11	Fees for services (non-employees)				_
а	Management	ol			
b	Legal	22,983		22,983	
С	Accounting	37,679		37,679	
d	Lobbying	ol			
e	Professional fundraising services. See Part IV, line 17	ol			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
3	(A) amount, list line 11g expenses on Schedule O)	81,199	51,949	6,559	22,691
12	Advertising and promotion	0	- 1,4 1-		
13	Office expenses	95,778	65,666	6,676	23,436
14	Information technology	59,477	44,963	2,615	11,899
15	Royalties	0	.,,,,,,		
16	Occupancy	70,062	51,868	10,685	7,509
17	Travel	355,047	348,069	77	6,901
18	Payments of travel or entertainment expenses	333,5	3.5,555		-,,
	for any federal, state, or local public officials	l ol		ł	
19	Conferences, conventions, and meetings	0			
20	Interest				
21	Payments to affiliates	0		•	
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	4,279	1,390	2,750	139
24	Other expenses Itemize expenses not covered	1,2.0	1,000	2,700	.00
	above (List miscellaneous expenses in line 24e If				!
	line 24e amount exceeds 10% of line 25, column				1
	(A) amount, list line 24e expenses on Schedule O)				,
а	Program Events & Campaigns	76,801	76,801	-	
a b	Chapter Expenses	49,696	49,696		
C	Other Fundraising & Creative Marketing Expenses	75,688	59,809	20	15,859
_	Staff, Board, & Volunteer Development	18,542	14,652	2,137	
d					1,753
e 25	All other expenses Miscellaneous Expenses	56,195	11,391	8,527	36,277
25	Total functional expenses. Add lines 1 through 24e	2,144,994	1,664,226	204,801	275,967
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)	1			

27

28

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 97,827 1 57,000 2 Savings and temporary cash investments 607,802 2 935,624 3 Pledges and grants receivable, net 39,640 3 213.284 4 Accounts receivable, net 0 4 0 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 28 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 0 7 0 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 6,985 9 47,779 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a . 18,411 b Less accumulated depreciation 10b 3,104 5.031 10c 15,307 11 Investments—publicly traded securities 8,087 11 5,691 12 Investments—other securities See Part IV, line 11 0 12 0 13 Investments—program-related See Part IV, line 11 0 0 13 14 Intangible assets 0 14 0 15 Other assets See Part IV, line 11 0 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 765,372 16 1,274,685 17 Accounts payable and accrued expenses 56,231 17 113,884 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 0 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D C 25 0 Total liabilities. Add lines 17 through 25 26 56,231 26 113,884 Organizations that follow SFAS 117 (ASC 958), check here Balances

pu	29	Permanently restricted net assets
or Fun		Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34.
ets	30	Capital stock or trust principal, or current funds
\ss(31	Paid-in or capital surplus, or land, building, or equipment fund
et/	32	Retained earnings, endowment, accumulated income, or other funds
ž	33	Total net assets or fund balances

Total liabilities and net assets/fund balances

complete lines 27 through 29, and lines 33 and 34.

Unrestricted net assets

Temporarily restricted net assets

765.372

1 26.

27

34

533,547

1,274,685

839,478

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Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,596,	654
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,144,	994
3	Revenue less expenses Subtract line 2 from line 1	3		451,	660
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		709,	141
5	Net unrealized gains (losses) on investments	5		_	
6	Donated services and use of facilities	6			
7	Investment expenses	7	_		
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		1,160,	<u>801</u>
Part				_	_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		<u></u>	<u></u>
1	Accounting method used to prepare the Form 990		- 1	Yes	No ;
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				Ĭ
	reviewed on a separate basis, consolidated basis, or both				E
	Separate basis Consolidated basis Both consolidated and separate basis		A 10	3 4 3	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1 2		
	separate basis, consolidated basis, or both		_	~~~	*
	X Separate basis Consolidated basis Both consolidated and separate basis			* ***	ŝ '
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	i			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in		* 3		
	Schedule O		6 3	4 × 2	• 30
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			- 1	
	the Single Audit Act and OMB Circular A-133?		3a	1	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2	(014)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name	Name of the organization Employer identification number									
	Jewish Voice for Peace 90-0018359							18359		
Pa		Reason for Public Char								
ine	orga	anization is not a private foundat			-		•			
2	H	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
	H				4i 470/	LV4V4V!	: \			
3	H	A hospital or a cooperative hos	·				-			
4		A medical research organization hospital's name, city, and state		· ·						
5	Ш	An organization operated for the section 170(b)(1)(A)(iv). (Com	e benefit of a colleg plete Part II)	e or university owned	or operate	ed by a go	vernmental unit desc	cribed in		
6		A federal, state, or local govern	ment or governmer	ntal unit described in s e	ection 170)(b)(1)(A)((v).			
7	X	An organization that normally redescribed in section 170(b)(1)	eceives a substantia (A)(vi). (Complete F	al part of its support fro Part II)	m a gove	rnmental ı	unit or from the gene	ral public		
8		A community trust described in	section 170(b)(1)(/	A)(vi). (Complete Part	ii)					
9		An organization that normally receipts from activities related to support from gross investment acquired by the organization af	to its exempt function income and unrelated	ns—subject to certain ed business taxable in	exception come (les	is, and (2) s section :	no more than 33 1/3 511 tax) from busine	3% of its		
10		An organization organized and	operated exclusive	ly to test for public safe	ety See se	ection 509	9(a)(4).			
11	Ш.	An organization organized and of one or more publicly support Check the box in lines 11a thro	ed organizations de	scribed in section 509	(a)(1) or	section 50	09(a)(2). See section	n 509(a)(3).		
a		Type I. A supporting organization (sorganization) Type II. A supporting organization Type II. A supporting organication	s) the power to regunder to regunder in the power to regular to to	larly appoint or elect a tions A and B.	majority	of the dire	ctors or trustees of th	ne supporting		
	·	control or management of the organization(s) You must o	ie supporting organi complete Part IV, S	zation vested in the sa ections A and C.	me perso	ns that co	ntrol or manage the	supported		
C	L	Type III functionally integral its supported organization(s	ated. A supporting o	organization operated i	n connect	ion with, a	and functionally integ	rated with,		
d]	Type III non-functionally in that is not functionally integr requirement (see instruction	itegrated. A suppor ated The organizat s) You must comp	ting organization operation generally must satiplete Part IV, Sections	ated in cor sfy a distr s A and D	nnection w bution red and Part	vith its supported org quirement and an att : V.	tentiveness		
e	l	Check this box if the organized functionally integrated, or Ty	ation received a wr	itten determination from	n the IRS	that it is a	Type I, Type II, Typ	e III		
f		Enter the number of supported		my integrated supporting	ig organiz	auon		0		
g		Provide the following information		ed organization(s)						
		Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)										
(B)										
(C)					-					
(D)			,							
(E)							<u>-</u>			

instructions

Pa	rt II Support Schedule for Orga						
	(Complete only if you checke						ınder
-	Part III If the organization fa	ils to qualify und	der the tests list	ted below, plea	ise complete F	Part III)	
	ction A. Public Support	() 0040	#10044	() 0040	(1) 0040		T (5.7)
_	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	705 005	040 500	4 457 000	4 407 440	0.405.000	0.000.470
2	include any "unusual grants ")	705,605	846,523	1,457,969	1,407,148	2,485,928	6,903,173
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities			-			
	furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	705,605	846,523	1,457,969	1,407,148	2,485,928	6,903,173
5	The portion of total contributions by each person (other than a governmental unit		3				
	or publicly supported organization)						
	of the amount shown on line 11.						
	column (f)	i					11 256
6	Public support. Subtract line 5 from line 4			·			11,356 6,891,817
	ction B. Total Support						1 0,001,017
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	705,605	846,523	1,457,969	1,407,148	2,485,928	6,903,173
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	846	472	318	2,186	4,912	8,734
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or		-				0
	loss from the sale of capital assets]					
	(Explain in Part VI)	1,300	О	3,926	7,587	7,485	20,298
11	Total support. Add lines 7 through 10						6,932,205
12	Gross receipts from related activities, etc. (see					12	138,817
13	First five years. If the Form 990 is for the or	ganızatıon's first, se	econd, third, fourth,	or fifth tax year as	s a section 501(c)(3)	_
	organization, check this box and stop here				n-1		<u> </u>
	ction C. Computation of Public Sup						
	Public support percentage for 2014 (line 6, co)		14	99 42%
	Public support percentage from 2013 Schedu					15	99 65%
	33 1/3% support test—2014. If the organization qualifies as	a publicly supporte	ed organization				► X
	33 1/3% support test—2013. If the organization qualified box and stop here. The organization qualified	s as a publicly sup	oorted organization				▶□
17a	10%-facts-and-circumstances test—2014 is 10% or more, and if the organization meets Part VI how the organization meets the "facts organization	s the "facts-and-circ	cumstances" test, c	heck this box and	stop here. Explai	n in	▶ □
b	10%-facts-and-circumstances test—2013 15 is 10% or more, and if the organization me Part VI how the organization meets the "facts supported organization	eets the "facts-and-	cırcumstances" tes	t, check this box a	nd stop here. Ex	ne plain in	•□
18	Private foundation. If the organization did n	ot chack a hov on l	ine 13 16a 16h 1	7a or 17h obook f	hic hay and and		

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

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

	if the organization falls to qui	ality under the t	tests listed belo	ow, please com	plete Part II)		
	ction A. Public Support	() 00/0	41.0044		40.00.0		
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise						0
_	sold or services performed, or facilities						
	furnished in any activity that is related to the	1					
_	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's	,					
	benefit and either paid to or expended on	1	i				_
_	its behalf						0
5	The value of services or facilities	1					
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
/a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons	·		 -		+	0
D	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that	į					
	exceed the greater of \$5,000 or 1% of the						0
_	amount on line 13 for the year Add lines 7a and 7b	o	0	0	0	0	0
8	Public support (Subtract line 7c from		<u> </u>	. *	U	<u> </u>	0
٥	line 6)	* ,	<i>""</i>	* *		}	0
Sec	tion B. Total Support					L.	·
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,					1	
	payments received on secunties loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income Do not include gain or					T T	
	loss from the sale of capital assets						
	(Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11,	$\overline{}$					
	and 12)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the or	ganızatıon's first, s	econd, third, fourth	n, or fifth tax year a	s a section 501(c)(3)	_
	organization, check this box and stop here						▶
Sec	tion C. Computation of Public Sup	port Percenta	ge				
15	Public support percentage for 2014 (line 8, co	olumn (f) divided by	y line 13, column (i	())		15	0 00%
16	Public support percentage from 2013 Schedu					16	0 00%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2014 (line	• • •	•	olumn (f))		17	0 00%
18	Investment income percentage from 2013 Sc					18	0 00%
19a	33 1/3% support tests—2014. If the organiz					and line 17 is	
_	not more than 33 1/3%, check this box and s	•	•		•		▶□
þ	33 1/3% support tests—2013. If the organization and the state of the s						. —
	line 18 is not more than 33 1/3%, check this t						▶⊨
20	Private foundation. If the organization did n	ot check a box on	line 14, 19a, or 19.	b, check this box ar	nd see instructions		▶

Part IV

Supporting Organizations

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

Section	A. All	Supporting	Organizations	í

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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3b		
3c		
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4b	*	
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10b	<u> </u>	لــــــا

	dule A (Form 990 or 990-EZ) 2014 A Jewish Voice for Peace 90-00	18359	F	age 5
Par	t IV Supporting Organizations (continued)			
	Heatherman of the first terms of	_	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			ŀ
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1.5		ļ
.	below, the governing body of a supported organization?	11a	+	├
b c	A family member of a person described in (a) above? A 35% controlled on the of a person described in (a) or (b) above? If "Vos" to a bound detail in Part Vo.	11b		├
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	11c		Ц
	tion B. Type i dapporting diganizations		Voc	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		162	NO
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	İ		
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported		 	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		- -
Sec	tion C. Type II Supporting Organizations			<u> </u>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	: 3	, *,*	٠.
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		* *	5.3
	or management of the supporting organization was vested in the same persons that controlled or managed		1	M.
	the supported organization(s)	1	3	
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax	(}	
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	<u> </u>	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-		ς.
	significant voice in the organization's investment policies and in directing the use of the organization's	, ·	<u></u>	, ,
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	د	2	£.
	supported organizations played in this regard	3		<u> </u>
	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstruction	s)	
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see instruc	tions)	,
2		(000 #/00/00		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities			
b		<u>2a</u>	 	
J	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	, "" «		\$
	reasons for the organization's position that its supported organization(s) would have engaged in these	1 1		
	activities but for the organization's involvement			
3	Parent of Supported Organizations Answer (a) and (b) below.	2b	├─┤	
-	· · · · · · · · · · · · · · · · · · ·			

Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard

trustees of each of the supported organizations? Provide details in Part VI.

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C	rgar		
1 Check here if the organization satisfied the Integral Part Test as a qualifying			structions. All
other Type III non-functionally integrated supporting organizations must co			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			•
instructions for short tax year or assets held for part of year)			,
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		· · · · · · · · · · · · · · · · · · ·
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other			* *
factors (explain in detail in Part VI)		}	i .
2 Acquisition indebtedness applicable to non-exempt-use assets	2		<u> </u>
3 Subtract line 2 from line 1d	3	0	0
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	1-1		
see instructions)	4	o	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 035	6	Ö	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		0

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

instructions)

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)					
Section	on D - Distributions			Current Year				
1	The parties of garings to decompliant exempt perpendicular							
2	Amounts paid to perform activity that directly furthers exem							
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purpor	ses of supported organiz	ations					
4	Amounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval required)							
6	Other distributions (describe in Part VI) See instructions							
7	Total annual distributions. Add lines 1 through 6		,	0				
8	Distributions to attentive supported organizations to which	the organization is respo	nsive	<u> </u>				
	(provide details in Part VI) See instructions							
9	Distributable amount for 2014 from Section C, line 6			0				
10	Line 8 amount divided by Line 9 amount			0 000				
	, and a second s	1 -	(ii)	(iii)				
s	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014				
1	Distributable amount for 2014 from Section C, line 6	· » » »		0				
2	Underdistributions, if any, for years prior to 2014	* * * *		,				
	(reasonable cause required-see instructions)			*				
3	Excess distributions carryover, if any, to 2014	* .	* * * * * * * * * * * * * * * * * * * *	433°				
a	*** **		· 1/2 · · ·/	₩ 1 3 6 .				
b		2 . A \$ S		``; 'A				
С	· A A	* * * * * * * * * * * * * * * * * * * *	* 4	* \$.				
d	PART OF THE PART O	771	٧, ١,	** * * * * * * * * * * * * * * * * * * *				
е	From 2013	` ` `	> 4 × ***	· vo Valuo				
f	Total of lines 3a through e	0		A.M.				
g	Applied to underdistributions of prior years	*	0	3 1 2 2				
h		(* * * * * * * * * * * * * * * * * * *	* ; *	0				
i	Carryover from 2009 not applied (see instructions)	* * * * * * * * * * * * * * * * * * * *	2 · · · · · · · · · · · · · · · · · · ·	min har i z				
<u>i</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f	0		will.				
4	Distributions for 2014 from Section	· (2 . '1)	`, **	* *				
	D, line 7 \$ 0		`					
a	Applied to underdistributions of prior years	· * * * * * * * * * * * * * * * * * * *	0	, 1.00				
b	Applied to 2014 distributable amount	* \$ ~ ~ ~ .	* * * * * * * * * * * * * * * * * * * *	0				
С	Remainder Subtract lines 4a and 4b from 4	0	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
5	Remaining underdistributions for years prior to 2014, if			1. (4)				
	any Subtract lines 3g and 4a from line 2 (if amount	* 1						
	greater than zero, see instructions)		0					
6	Remaining underdistributions for 2014 Subtract lines 3h	1. 1. 3	* 3	* *************************************				
	and 4b from line 1 (if amount greater than zero, see							
	instructions)			0				
7	Excess distributions carryover to 2015. Add lines 3	<u> </u>	÷ , , , , ,					
	and 4c	o						
8	Breakdown of line 7	* **!;						
a	<i>₩</i>	* * * * * * * * * * * * * * * * * * * *	* * *.					
b	***	`	**************************************	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
c		/ 1 % · · · · · · · · · · · · · · · · · ·	× × × × × × × × × × × × × × × × × × ×					
d	Excess from 2013 0	***************************************	* (2, 2					
	Excess from 2014 0							
		·	100	and the second second				

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Part VI	Supplemental Inf	formation. Provide	the explanations	required by Part I	I, line 10, Part I	l, line 17a or 1	7b, and
	Part III, line 12 Al	so complete this pa	rt for any additio	nal information (S	ee instructions)		
					<u> </u>		
Part II Line	10 Miscellaneous rein	nbursements and depo	sits were received	during the course			
of performu	ng the organization's ta	ax exempt function					
of Pononin	19 110 01947112410110 1						
			•				
					·		
					· • • • • • • • • • • • • • • • • • • •		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

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

• <u>S</u>	section 501(c)(4), (5), or (6) o	rganizations Complete Part III			
	e of organization			Employe	er identification number
	wish Voice for Peace				90-0018359
Pai		he organization is exempt und			organization.
1	•	he organization's direct and indirect p	olitical campaign a		
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa		he organization is exempt und			
1	· · · · · · · · · · · · · · · · · · ·	excise tax incurred by the organizatio			
2	-	excise tax incurred by organization m	-	-	
3	If the organization incurre	ed a section 4955 tax, did it file Form	4720 for this year?)	Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part				
Pa	rt I-C Complete if t	he organization is exempt und	er section 501	c), except section 501	(c)(3).
1	Enter the amount directly	expended by the filing organization f	or section 527 exe	empt function	
	activities			▶ \$	
2		iling organization's funds contributed	to other organızatı		
	for section 527 exempt fu			▶ \$	
3		penditures Add lines 1 and 2 Enter h	ere and on Form		
	line 17b			▶ \$	0
4		file Form 1120-POL for this year?			Yes No
5	Enter the names, address	ses and employer identification numb	er (EIN) of all sect	ion 527 political organization	ons to which the filing
		ents For each organization listed, ent ntributions received that were prompt			
		I fund or a political action committee (
				Γ	l dictional diction
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
		i		funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
	'				none, enter -0-
<u> </u>					
(1)					
(2)					
(3)					
(4)					
(5) ——–					
(6)				}	

С

d

Total lobbying expenditures

Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Page	2
	_

P	art II-A Complete if the organizat	ion is exempt	under section 50	01(c)(3) and filed	Form 5768 (ele	ction			
_	under section 501(h)). Check ▶ If the filing organization	helenge to on a	efficient arounds	and link in Dank IV a	and officers of area				
A	Check ▶ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)								
В	Check ▶ ☐ If the filing organization	•		, , ,	•				
	Limits on Lo (The term "expenditures"	bbying Expendit means amounts			(a) Filing organization's totals	(b) Affiliated group totals			
1a	Total lobbying expenditures to influence p	oublic opinion (gra	ss roots lobbying)		5,131	0			
b	Total lobbying expenditures to influence a	legislative body	(direct lobbying)		318	0			
C	Total lobbying expenditures (add lines 1a	and 1b)			5,449	_ 0			
d	Other exempt purpose expenditures				2,139,545	0			
е	Total exempt purpose expenditures (add	lines 1c and 1d)			2,144,994	0			
f	Lobbying nontaxable amount Enter the a	mount from the fo	llowing table in both	h					
_	columns		-		257,250	0			
	If the amount on line 1e, column (a) or (b) i	s: The lobbyin	g nontaxable amou	int is:	5 °				
[Not over \$500,000	20% of the a	mount on line 1e		The c	,			
[Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess	over \$500,000		r			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	is 10% of the excess	over \$1,000,000		is the same			
ļ	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	is 5% of the excess o	ver \$1,500,000					
\Box	Over \$17,000,000	\$1,000,000			*				
g	Grassroots nontaxable amount (enter 259	% of line 1f)			64,313	0			
h	Subtract line 1g from line 1a If zero or les	ss, enter -0-			0	0			
i	Subtract line 1f from line 1c If zero or less	s, enter -0-			0	0			
j	If there is an amount other than zero on e	ither line 1h or line	e 1ı, dıd the organız	ation file Form 472) reporting				
	section 4911 tax for this year?					Yes No			
			Period Under sec						
	(Some organizations that made a	section 501(h) e	lection do not hav	e to complete all o	f the five columns	below.			
	See	the separate inst	tructions for lines	2a through 2f.)					
	Lobb	ying Expenditure	s During 4-Year A	veraging Period					
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total			
2a	Lobbying nontaxable amount	154,767	177,554	189,697	257,250	779,268			
b	Lobbying ceiling amount (150% of line 2a, column(e))		*			1,168,902			

0

38,692

7,644

44,389

0

2,028

47,242

0

Schedule C (Form 990 or 990-EZ) 2014

5,449

64,313

5,131

15,121

194,636

291,954

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has I (election under section 501(h)).	NOT filed	d For	m 576	8	
For e	each "Yes," response to lines 1a through 1ı below, provide in Part IV a detailed descript	ion J	a)	[(b)	
	e lobbying activity	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or	ŀ				
	referendum, through the use of				4	
а	Volunteers?		<u> </u>			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		↓			
C	Media advertisements?	<u> </u>	<u> </u>			
d	Mailings to members, legislators, or the public?		ļ			
e	Publications, or published or broadcast statements?		_			
f	Grants to other organizations for lobbying purposes?	-	-	<u> </u>		
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	-				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	<u> </u>				
i	Total Add lines 1c through 1i		1			0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			 -		
b	If "Yes," enter the amount of any tax incurred under section 4912	<u>├</u>	ļ			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5)	OFS	ection		
	501(c)(6).	, , , , , , , , , , , , , , , , , , , ,	, 0. 0	000.0.	•	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Na answered "Yes."	o," OR (I	o) Pai	rt III-A	, line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year					
b	Carryover from last year		2a 2b			
c	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		Ť			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible					
	lobbying and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			0
Part						
Provid	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr	oup list), l	Part II-	A, lines	1 and	į
2 (se	e instructions), and Part II-B, line 1. Also, complete this part for any additional information					
						

A Jev	wish Voice for Peace orm 990 or 990-EZ) 2014	90-0018359
	Supplemental Information (continued)	Page 4
urciv	Supplemental information (commuted)	
·		
		·
		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

Open to Public Inspection

OMB No 1545-0047

2014

<u>A Je</u>	wish Voice for Peace		90-0018359
Par	t I Organizations Maintaining Don	or Advised Funds or Other Similar F	unds or Accounts.
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do	onor advisors in writing that the assets held in	n donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, don		
	used only for charitable purposes and not for		
	purpose conferring impermissible private bei		Yes No
Par	t II Conservation Easements.		
611		vered "Yes" to Form 990, Part IV, line 7	,
1	Purpose(s) of conservation easements held		
'			of a histography managery land area
	Preservation of land for public use (e g , rec		of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation eas	ements	2b
С	Number of conservation easements on a cer	tified historic structure included in (a)	2c
d	Number of conservation easements included	In (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Regis	er	2d
3	Number of conservation easements modified	l, transferred, released, extinguished, or term	ninated by the organization
	during the tax year	•	
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written policy i	egarding the periodic monitoring, inspection,	handling of
	violations, and enforcement of the conservat	ion easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitor	ing, inspecting, and enforcing conservation e	easements during the year
	•		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation easer	ments during the year
	\$		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements of	of section
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No
9	In Part XIII, describe how the organization re	ports conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the	text of the footnote to the organization's fina	incial statements that describes
	the organization's accounting for conservation	n easements	
Par		ections of Art, Historical Treasures,	
	Complete if the organization answ	<u>vered "Yes" to Form 990, Part IV, line 8</u>	
1a	If the organization elected, as permitted under	er SEAS 116 (ASC 958), not to report in its re	evenue statement and balance sheet
	works of art, historical treasures, or other sin		
	of public service, provide, in Part XIII, the tex		
b	If the organization elected, as permitted under		
-	works of art, historical treasures, or other sin		
	of public service, provide the following amou		and a recognition in termination
	(i) Revenue included in Form 990, Part VIII,		▶ \$
	(ii) Assets included in Form 990, Part X	····•	> \$ > \$
2	If the organization received or held works of	art historical treasures or other similar asse	·
-	following amounts required to be reported ur		
а	Revenue included in Form 990, Part VIII, line	, , ,	▶ €
b	Assets included in Form 990, Part X	•	• \$
	, iccord moraded in redifferent area.		- Ψ

Part	Organizations Maintaining	Collections of	Art, Hist	orical Tr	reasures, o	r Othe	<u>er Similar Asse</u>	ts (con	<u>tınue</u> c	<u>d) </u>
3	Using the organization's acquisition, a	ccession, and other	records,	check any	of the follow	ing tha	t are a significant			
	use of its collection items (check all the	at apply)		_						
а	Public exhibition		d	Loan	or exchange	prograi	ms			
b	Scholarly research		е 🗌	Other						
С	Preservation for future generation	ons								
4	Provide a description of the organization	on's collections and	l explaın h	ow they fu	urther the org	anızatı	on's exempt purpo	se in		
5	During the year, did the organization s assets to be sold to raise funds rather							□ γ ₀	es 🗀	No
Part			<u> </u>	<u>'</u>						
	Complete if the organization 990, Part X, line 21		to Form	990, Pa	rt IV, line 9,	or rep	orted an amour	t on Fo	orm	
1a	Is the organization an agent, trustee, concluded on Form 990, Part X?	ustodian or other in	ntermediar	y for cont	ributions or o	ther as	sets not		es 🔲	No
b	If "Yes," explain the arrangement in Pa	art XIII and complet	e the follo	wing table	•					
							Δ	mount		
С	Beginning balance					10				
d	Additions during the year					10				
e f	Distributions during the year Ending balance					1				0
	-	st on Form 000. Bor	+ V. line O	1 for one			· · · · · · · · · · · · · · · · · · ·			
2a b	Did the organization include an amour If "Yes," explain the arrangement in Pa						=	Ш 1	es 🔀	No
		art Alli Check nere	ir trie expi	anation n	as been prov	iaea in	Рап ХІІІ			
Part	Complete if the organization	answered "Ves"	to Form	000 Pa	d IV/ Jupo 10	١				
	Complete if the organization	(a) Current year		oryear	(c) Two years		(d) Three years back	(e) Fo	our years	hack
1a	Beginning of year balance	(2) 02.10.11)02.	(2)	o. you.	(a) The years	, baok	(u) Times years back	1 (0,7.5	ur your	- Duoit
b	Contributions									
С	Net investment earnings, gains,							 		
	and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs							-		
f	Administrative expenses	0		0		0				
g 2	End of year balance Provide the estimated percentage of the	<u>~</u>			lump (a)) bel)		0
a	Board designated or quasi-endowmen		%	c .g, cc	namm (a)) nei	u us				
b	Permanent endowment	%								
С	Temporarily restricted endowment	▶ %								
	The percentages in lines 2a, 2b, and 2									
3a	Are there endowment funds not in the	possession of the c	rganizatio	n that are	held and ad	mınıste	red for the			
	organization by								Yes	No
	(i) unrelated organizations							3a(i)	 	
b	(ii) related organizations If "Yes" to 3a(ii), are the related organi			C-b-d	D0			3a(ii)	\vdash	
4	Describe in Part XIII the intended uses		•					3b		
Part			13 CHOOWI	nent lund	<u> </u>					
· are	Complete if the organization		to Form	990. Pai	rt IV. line 11	a See	e Form 990. Par	t X lini	e 10	
	Description of property	(a) Cost or of			st or other		Accumulated		ook valu	
		(investr		1	s (other)	, , ,	depreciation	\-, -		•
1a	Land		0		0					0
b	Buildings		0		0		0			0
C	Leasehold improvements	<u> </u>	0		0	<u> </u>	0			0
d	Equipment		0		18,411		3,104		1	5,307
e Total	Other Add lines 1a through 1e (Column (d) r	nust equal Form 00	0 Part X	column (0 R) line 10c)	L	0			5 207
· Otal	., as mas is anough to foolunin (a) t	oqual i Ollii 98	σ , rank Λ ,	<u> </u>	J, 11110 100)				1	5,307

Schedule D (Form 990) 2014 A Jewish Voice for Peace

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Page 2

Part VII	Investments—Other Securit Complete if the organization a		m 990. Pa	art IV. line 11b See Fo	orm 990. Part X. line 12.
(a)	Description of security or category (including name of security)	(b) Book value		(c) Method of Cost or end-of-yea	f valuation
(1) Financial	derivatives		0		
	eld equity interests		0		
(3) Other					
(A)					<u> </u>
(B)					
(C)					
<u>(D)</u>					
	·····			,	
(G)					
(H)	must equal Form 990 Part X, col (B) line 12)			*	* * * * * * * * * *
Part VIII	·-		0 * -:	<u> </u>	
Part VIII	Investments—Program Rela		000 Da	net IV June 11e Cae Fe	000 Dark V Ivaa 42
	Complete if the organization a		111 990, Fa		
	(a) Description of investment	(b) Book value		(c) Method of Cost or end-of-yea	ar market value
(1)					
(2)					
(3)					
<u>(4)</u>					
(5)					
(7)					
(8)		<u> </u>	-	 -	
(9)		<u> </u>			
	must equal Form 990 Part X, col (B) line 13)		0 🧎	· 4 *	
Part IX	Other Assets.	·	<u> </u>		
	Complete if the organization a	nswered "Yes" to For	n 990, Pa	art IV, line 11d See Fo	orm 990, Part X, line 15
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)		<u> </u>			<u> </u>
(6)					, <u> </u>
(7)					
(8)					
(9)	n (b) must equal Form 990, Part X, co	ol /P\ lino 4E \			
Part X	Other Liabilities.	or (b) line 15)			<u> </u>
r are X	Complete if the organization al line 25	nswered "Yes" to Form	m 990, Pa	rt IV, line 11e or 11f. S	See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	· 1	7 m/ 74 52 5	612.
(1) Federal i		(b) Book value	0		
(2)					
(3)				, , ,	
(4)				3 3 4 4 ×	
(5)			To a	* ,	
(6)				5.à	
(7)				*	
(8)					
(9)			^	*, *	
	ust equal Form 990, Part X, col (B) line 25)		0 1	* * * * *	
2. Liability for u	incertain tax positions. In Part XIII, provi	de the text of the footnote	to the organ	ızatıon's financial statemen	ts that reports the
organization's l	liability for uncertain tax positions under	FIN 48 (ASC 740) Check	here if the to	ext of the footnote has beer	provided in Part XIII

Schedule D (Form 990) 2	014 A Jewish Voice for Peace	90-0018359	Page 5
Part XIII Su	pplemental Information (continued)		
-			
- 			
			-
	*		

Schedule F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

A Jewish Voice for Peace

Employer identification number 90-0018359

Par		ormation on A 1 990, Part IV, lin		side the United States.	Complete if the organization a	nswered
1		es' eligibility for t		ords to substantiate the amou		Yes No
2	For grantmakers. Desc assistance outside the U		e organization's	procedures for monitoring th	ne use of its grants and other	
3_	Activities per Region (T	he following Par	t I, line 3 table c	an be duplicated if additiona	space is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
<u>(1)</u>	Europe (Including Iceland and Greenland)	0	0	fundraising appeals		47
(2)	East Asia and the Pacific	0	0	fundraising appeals		47
_(3)	Middle East and North Africa	0	0	fundraising appeals		47
(4)	North America	0	0	fundraising appeals		47
_ (+) (5)	South Asia	0	0	fundraising appeals		47
(6)	Sub-Saharan Africa	0	0	fundraising appeals	1 2 2 3 3 3	47
(7)	-					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(8)						
_(9)						
(10)						
<u>(11)</u>						
(12)			-			
<u>(13)</u>	~					
(14)				, ,		
(15)					<u> </u>	
(16)						
(17)						
	Sub-total	0	0		·	282
b	Total from continuation sheets to Part I	0	_			
С	Totals (add lines 3a and 3b)	0	0	**************************************		282

Schedule F (Form 990) 2014 A Jewish Voice for Peace

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

		מיניין ווויס יכן יכן מון ניסוקים ייסיין יכן ייסיין יכן ייסיין ייסייין ייסיין ייסייין ייסיין ייסייין ייסיין ייסייין ייסייין ייסייייין ייסייין ייסייין ייסיייייייי		מונים מונים	ממשונים וו ממפווים	ימו פאמכר ופ ווכר		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(ŋ)								
(2)								
(3)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								1
(14)								
(15)								•
(16)								

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

Enter total number of other organizations or entities

Schedule F (Form 990) 2014

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A Jewish Voice for Peace

Schedule F (Form 990) 2014 A Jewis

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16

Schedule F (Form 990) 2014 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recapients Part III can be duplicated if additional space is needed (b) Region (a) Type of grant or assistance E 2 ව € 9 9 9 8 9 5 티 (12) (13) (15) **E** (16) (17) (18)

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	X No

Schedule F (F	(Form 990) 2014 A Jewish Voice for Peace	90-0018359	Page 5
Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds), Part I, amounts of investments vs expenditures per region), Part II, line 1 (accounting and Part III, column (c) (estimated number of recipients), as applicable Also additional information (see instructions)	ng method), Part III (accounting method),	
			- -
		·	
	·	·	
		······	
		·	
 -	······································	·	
·			
	•••••••••••••••••••••••••••••••••••••••		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs.gov/form990. Name of the organization Employer identification number A Jewish Voice for Peace 90-0018359 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply а Mail solicitations е Solicitation of non-government grants Internet and email solicitations f h Solicitation of government grants Phone solicitations Special fundraising events C g d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (III) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) (II) Activity custody or control of (or retained by) or entity (fundraiser) fundraiser listed in from activity contributions? organization col (ı) Yes No 1 0 0 0 O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 O 0 10 0 0 0 Total 0 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported Part II more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through col (c)) Houseparty Brooklyn NONE Houseparty DC (event type) (total number) (event type) Revenue Gross receipts 19,650 5,316 24,966 Less Contributions 19,650 5,316 24,966 Gross income (line 1 minus line 2) 0 0 Cash prizes 0 Noncash prizes 0 Expenses Rent/facility costs Food and beverages 150 150 Entertainment Other direct expenses 100 622 722 Direct expense summary Add lines 4 through 9 in column (d) 872) 11 Net income summary Subtract line 10 from line 3, column (d) -872 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a Revenue (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 0 Direct Expenses Cash prizes 0 Noncash prizes 0 Rent/facility costs Other direct expenses 0 Yes Yes ____% % Yes % Volunteer labor No No No Direct expense summary Add lines 2 through 5 in column (d) 0) Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities Is the organization licensed to conduct gaming activities in each of these states? Yes If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes

Schedu	ule G (Form 990 or 990-EZ) 2014 A Jewish Voice for Peace	90-0018359 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity conducted in	
а	The organization's facility	13a %
b	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name ▶	
	Address ▶	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\\$ \$ 0 and the	
	amount of gaming revenue retained by the third party > \$0	
С	If "Yes," enter name and address of the third party	
	Name ▶	
	Address ►	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation \$0	
	Description of services provided	
	Director/officer Employee Independent contractor	
17	Mandatory distributions	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$\$\$\$\$\$\$\$	0
Part		s (iii) and (v), and

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

A Jewish Voice for Peace	90-0018359
Form 990, Part VI, Section B, Line 11b Form 990 Review - All board members receive a copy of	
the draft 990 electronically and have the opportunity to give feedback. The Treasurer reviews	
the draft line by line	
Form 990, Part VI, Section B, Line 15a Executive Compensation - The Board of Directors	
consulted with a headhunter and the director of a foundation that funded similar sized social	
justice organizations regarding the salary range of the Executive Director position	
Additional considerations were the fiscal health and outlook for the organization, and wanting	
a relatively flat salary structure in comparison with the rest of the staff. The salary range	
was approved by the board, and based on that an offer was made to the Executive Director	
Form 990, Part VI, Section B, Line 15b Compensation of Other Key Employees - None of the	
other paid employees of the organization fit the IRS' definition of "officer" or "key	
employee " However, the organization has implemented salary policies and comparisons with our	
industry and comparable jobs during this period to determine salaries of all employees	
Form 990, Part VI, Section C, Line 19 Disclosure - The Organization makes its governing	
documents and financial statements available to the public upon request	
Form 990, Part VI, Section A, Line 6 The Organization has members. The only requirement for	
membership is to pay annual dues of \$18	
Form 990, Part VI, Section A, Line 7 The Organization's members are voting members	
Individuals wishing to become members must pay annual dues. Members elect members of the bo	eard
of directors. Decisions by directors are subject to membership approval if such decisions	•
change membership rights or responsibilities	•
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Name of the organization	Employer identification number
	90-0018359