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 black lung

benefit trust or private foundation)

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

OMB No. 1545-0047 Open to Public Inspection

AF	or the	2009 calendar year, or tax year beginning and	ending		
Вс	heck if oplicable	Please C Name of organization		D Employer identifi	cation number
а		Insent Cappart Celler for himterest and ocea-	ish		
	Addres change				
	]Name Johang	Doing Business As Jews/Gentiles Joined in	Messia	And the same of th	460995
	]Initial return		Room/suite	E Telephone numbe	er and and a
	Termir ated	Instruc- L O Social State Stat		630-	668-3328
	Ameno	City Of town, State of Country, and Zir + 4		G Gross receipts \$	212433.
	Applic tion pendir	Wheaton, IL 60187		H(a) Is this a group r	
	pendir	I - Name and address of principal officer: 0 data v zzz		for affiliates?	Yes X No
		PO Box 147, Carol Stream, IL 60188		H(b) Are all affiliates inc	cluded? Yes No
1 7	ах-өх	empt status: X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527		od .	list. (see instructions)
JV	Vebsii	te:▶ www.Caspari.com		H(c) Group exemption	
KF	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 2002	<b>V</b> State of legal domicile: ${ t IL}$
	-41	Summer of the second se			
herenen (h	1	Briefly describe the organization's mission or most significant activities: Equi	pping	the next ge	neration of
Activities & Governance		believers in Jesus in Israel			
na	2	Check this box if the organization discontinued its operations or dispo-	sed of more	e than 25% of its net a	ssets.
)Ve				3	1 5
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)		4	5
S		Total number of employees (Part V, line 2a)		1 -	4
		Total number of volunteers (estimate if necessary)		1	2
Ę,		Total gross unrelated business revenue from Part VIII, column (C), line 12			0.
₫		Net unrelated business taxable income from Form 990 T, line 34			0.
				Prior Year	Current Year
43	8	Contributions and grants (Part VIII, line 1h)		153316.	
อกเ	i	Program service revenue (Part VIII, line 2g)	104252.	8392.	
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4109.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		261677.	210514.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		8250.	
		Benefits paid to or for members (Part IX, column (A), line 4)	1		
(A		2.1 the standard standard for the standard (Port IV column (A) lines 5.10)	1	84985.	95390.
Expenses	160	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)			
e d	h	Total fundraising expenses (Part IX, column (D), line 25) 169	41.	- And the state of	
M		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	Annual Property	149871.	118285.
1		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		243106.	
		Revenue less expenses. Subtract line 18 from line 12		18571.	
28		Herefue 253 Capanaca, Sabrida in 15 non in 15	8	eginning of Current Year	End of Year
ars (	20	Total assets (Part X, line 16)		55966.	36622.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		16283.	100.
let de la company de la compan	22	Net assets or fund balances. Subtract line 21 from line 20		39683.	36522.
声	irt II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules at and complete. Declaration of preparer (other than officer) is based on all information of which preparer has	nd statements,	and to the best of my knowle-	dge and belief, it is true, correct,
		and complete. Declaration of preparer (other than officer) to based our an intermation of which preparer has	any knowledge		
Oi.	•			John	12,2010
Sign		Signature of officer	Marketon of Alexander Section Section 1994	Date	
Her	е	James Galvin, Board Chair			
		Type at print name and bite		ng yann yann yang garapatan sarang sarang mada a kaba-dabbada da kaba-dabbada kaba-dabbada kaba-dabbada kaba-d	
Taxaggi (Alba)	nango paramaphina	Preparer's Date		neck if Prepa	rer's identifying number nstructions)
Paid	I	signature 7/0	Se er	lf- nployed ▶ X	iwa awasensoj
•	arer's	Firm's name (or Hauser Financial Group	for from the state of the state	EIN D	
Use	Only	yours if self-employed), 146 N Lambert Rd		Annual Constitution of the	and the state of t
		address, and Clen Ellyn, Illinois 60137		Phone no. ▶ 6	30-858-3712
Mar	, tha II	RS discuss this return with the preparer shown above? (see instructions)		A STATE OF THE PARTY OF THE PAR	Yes No
ivia)	/ LITE I	to discuss mig territt with the highligh shout about 1600 mandaget.			

Pa 1	
1	n 990 (2009) Studies, Jerusalem, USA Inc. 36-4460995 rt III   Statement of Program Service Accomplishments
	Briefly describe the organization's mission:  Equipping the next generation of believers in Jesus in Israel
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes [  Yes ]
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code: )(Expenses\$ 5067. including grants of\$ )(Revenue \$ Presentations to churches, missions committees and others regarding vision of believers in Jesus in support of the Church of Diaspora in Israel
-,,-	
j	Code: )(Expenses\$ 23746. including grants of\$ )(Revenue \$ Programs designed to provide resource materials to Messianic congregations in Israel
-	
_	
-	
F	Code: )(Expenses\$ 11000. including grants of\$ )(Revenue\$ Project to develop and document the history of Jewish believers in
F	Project to develop and document the history of Jewish believers in
È	Project to develop and document the history of Jewish believers in
P	Project to develop and document the history of Jewish believers in

Form **990** (2009)

			Yes	No
1	to the first a private regularity			
o	If "Yes," complete Schedule A	1	X	
3	the state of Contributors	2	X	
•	o and a series of pointed campaign activities on penalt of of it opposition to callulates to			
4	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	3		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	4		X
Ū	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	5		-
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		1	37
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		X
	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	-	+	1
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	-		2.5
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			-==-
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
6	The state of the s			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
0	program related in Factor, into to triat is 570 or more or to total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	The state of the s			
•	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
1 200	Schedule D, Parts XI, XII, and XIII.		3.5	
12A	Mr. II	12	X	
	If "Vas " completing Schedule D. Parts VI. VII. and VIII is estimated.			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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,	1.94		42
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			44
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		T	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
0.5	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	İ	X

United States on Part K, column (A), line 11 if 17 if yes, "complete Schedule (, Parts I and I)   21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 11 if 17 if yes, "complete Schedule (, Parts I and I)   22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 3, 4, or 5 about compensation of the organization succernst and former officiers, directors, trustoes, key employees, and individuals in the United States on Part IX, 22 X X 24 Did the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization levers and former officiers, directors, trustoes, key employees, and individuals are made of the part of the part of the part of the organization have a tax-exampt bond issue with an outstanding principal amount of more than \$100,000 us of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule (, If No', go to line 26 X X X 24d X 10 the organization maintain an escrew account other than a refunding escrew at any time during the year? 24d 24d X 2	21	Did the organization report more than \$5,000 of greats and other assistance in the same of		Yes	No
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and All II 22 II 23 Did the organization answer "Yos" 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. Did the organization have a trax-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 Documber 31, 2007 If "Yes," "answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  Did the organization maintain an escrow account other than a refunding asserow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding asserow at any time during the year?  24d Did the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d John Schotche M. II "No", go to line 25  Searchen 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?  24d John Schotche J. Part II be the organization has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction party to a business transaction with a disqualified person in a prior year, and that the transaction provide a grant or other as	<i>E</i> , 1	The state of the s			
column (A), line 2° II "Yes," complete Schedule I, Parts I and III 20 Did the organization were "Yes" to Part III, Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  6 Did the organization acts any conseeds of tax-exempt bonds beyond a temporary period exception?  7 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  8 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  9 Did the organization act that it ongaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  10 Is the organization has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II  10 Did the organization has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II  11 Did the organization party to a business transaction with one of the following parties, (see Schedule L, Part IV II  12 Did the organization aparty to a business transaction with one of the following parties, (see Schedule L, Part IV II II  12 Did the organization one party to a business transaction with one of the following parties, (see Schedule L, Part IV IV II	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United Others and Others	21		X
Did the organization asswer "Yes" to Part VII, Section A, line 9, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schoolule J.  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25.  Did the organization maintain an escrow account other than a refunding scrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding scrow at any time during the year? 1.  24d	Eige fina	column (A), line 2? If "Yes " complete Schedule I. Parts Land III			7.5
and former officers, directors, trustoses, key employees, and highest compensated employees? If "Yes," complete Schedule J.  24a Did the organization have a tax-exampt bond issue with an outstanding principal amount of more than \$100,000 as of the least day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 26  5 Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception?  6 Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception?  7 Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? Or Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  8 Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  9 Did the organization and the same of the principal schedule L, Part I  10 Is the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year?  10 Did the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year?  11 Did the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year?  12 Did the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year?  12 Did the organization area to the organization of the organization with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person outstanding as of the end of the organization for organization and the prior or organization and the prior organization and the prior organization and the prior organization and the prior or organization ana	23	Did the organization answer "Yes" to Part VII. Section A line 3.4 or 5 about compensation of the organization's current	22	-	A
Schedule J.  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  50 bid the organization regalization invested any proceeds of tax-exempt bonds beyond a temporary period exception?  24b  10 bid the organization maintain an ascrow account other than a refunding escrow at any time during the year of defease any tax-exempt bonds?  25c  25d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "Yes," complete Schedule L, Part I.  25e 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-E27 if "Yes," complete Schedule L, Part II.  26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part III.  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, bushbantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions?  28 A current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization aparty to a business transaction with one of the following parties, (see Schedule L, Part IV  30 Did the organization for each or indirect owner? If "Yes," complete Schedule L, Part IV  31 A current or former officer,		and former officers, directors, trustees, key employees, and highest compensated employees? If "Ves." complete			
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," amove lines 24b through 24d and complete Schadule K. If 'No", go to line 25  b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b  c) Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d  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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 1f "Yes," complete Schedule L, Part I 25a X  b) Is the organization wave 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-E27 If "Yes," complete Schedule L, Part I 25b  Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year // "Yes," complete Schedule L, Part II 25b  ZY Did the organization organized to the organization's tax year // "Yes," complete Schedule L, Part IV 25c  Schedule L, Part III 25c  28 Was the organization aparty to a business transaction with one of the following parties, (see Schedule L, Part IV 25c  b) A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 25c  c) An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 25c  d) Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 25c  D) Did the organization is elicitated to any tax-exempt or taxable entity? If "Yes," complete Schedule M, Part		Schedule J	00		77
last day of the year, that was issued after December 31, 2002/ If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", og to line 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization axer that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the reganization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I Was a boan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part 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 25b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 26b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c A en entity of which a current or former officer, director, trustee, or key employee? If "Yes," com	24:	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20	<del> </del>	<u> </u>
Schedule K. If 'No', go to line 25 b Did the organization misstand in year oceased of tax exempt bonds beyond a temporary period exception? 24b b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization 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-E2? If 'Yes,' complete Schedule L, Part II  27b Was a bean to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part III  28b Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, aubstantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete 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 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  b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  28c X  30 Did the organization receive more than \$256.000 in non-cash contribut		last day of the year, that was issued after December 31, 2002? If "Yes." answer lines 24h through 24d and complete			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b   24c   24d   2		Schedule K. If "No", go to line 25	2/2		v
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "I" "Yes," complete Schedule L, Part I 25b X better transaction 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-E27 if "Yes," complete Schedule L, Part I 25b X Schedule L, Part I 27b Mas a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26b X 27b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, businestalial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete 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 28b X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X A current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or key employee of the organization of the organization	ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		-	43
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If "Yes," complete Schedule N, Part I  31	31	Did the organization liquidate terminate or dissolve and cease operations?	30		<u>X</u> _
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  34 Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  Is any related organization a controlled entity within the meaning of section 512(b)(13)?  If "Yes," complete Schedule R, Part V, line 2  35 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 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	٠.				3.5
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38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			37		X
Note. All Form 990 filers are required to complete Schedule O. 38 X					-
		Note. All Form 990 filers are required to complete Schedule O.	38	X	eller manadar vit

	Entoutho must be a second of the second of t	F	Yes	No
1	a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter ·0· if not applicable	0		
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b	0		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
2	a Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,	1c		
	filed for the calendar year anding with as within the year and the second of the secon	A		
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	4	32	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	X	
3				7,5
1	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3a</u>	-	X
4:	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	<u>3b</u>		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	1 -		37
k	of "Yes," enter the name of the foreign country: ▶	<u>4a</u>		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
k		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	30		- 42
	Tax Shelter Transaction?	50		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
	any contributions that were not tax deductible?	6a	1	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Wes		6h
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		-	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	. 7a		X
b	if "Yes," did the organization notity the donor of the value of the goods or services provided?	7b		4,64
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	. 7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
f	benefit contract?  Did the organization during the year pay promiums directly or indirectly an account of the promium of the p	. <u>7e</u>		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	71		<u>X</u> _
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	7h		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
9	at any time during the year?  Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a		
10	Section 501(c)(7) organizations. Enter:	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
	Section 501(c)(12) organizations. Enter:	-		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	-		
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	14-61		
			-	-

Caspari Center for Biblical and Jewish

Form 990 (2009) Studies, Jerusalem, USA Inc. 36-4460995 Page

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	ection A. Governing Body and Management				
	a Enter the number of voting members of the governing body	   _		Yes	No
	b Enter the number of voting members that are independent	_1a	_5		
2	and the state of t	1b	_5		
-			ŀ		
3			2		X
_	a management daties dustoinfailly performed by or unider me	direct supervision			
4	of officers, directors or trustees, or key employees to a management company or other person?		3		X
5	of the proof of th	m 990 was filed?	4		X
6	Did the organization become aware during the year of a material diversion of the organization's assets Does the organization have members or stockholders?			<del> </del>	X
7:			6		X
-	governing body?	nbers of the			
ı	governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other pers	0	<u>7a</u>	<del> </del>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken of	ons?	<u>7b</u>	<del> </del>	X
_	by the following:	luring the year			
2					
	The governing body?  Each committee with authority to act on behalf of the governing body?		<u>8a</u>	X	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac		8b	X	
	organization's mailing address? If "Ves " provide the names and addresses in Oaks to Co.	hed at the			
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ction B. Policies (This Section B requests information about policies not required by the Internal Re	<u> </u>	9	***********	X
	The internal Helphanic Country of the Internal Helphanic Policies not required by the Internal Helphanic Policies	/enue Code.)		T	ı
10a	Does the organization have local chapters, branches, or affiliated			Yes	No
h	Does the organization have local chapters, branches, or affiliates?  If "Yes," does the organization have written policies and procedures governing the activities of such cl	***************************************	<u>10a</u>		X
~	and branches to see our that our out!				
11	Has the organization provided a copy of this Form 000 to all more by a fit a copy of the first form of the copy of the form of the copy of the first form of the copy of the c		10b		
11A	Has the organization provided a copy of this Form 990 to all members of its governing body before filling Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ig the form?	11_	X	
12a	Does the organization have a written conflict of interest policy of the least of the second s				
	5 Tribital State of Mitorost Policy: 11 140, 90 to 11/16 15	***************************************	. 12a	X	-
	Are officers, directors or trustees, and key employees required to disclose annually interests that could to conflicts?				
_	to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "You		. 12b	X	
Ü	in Schedule O how this is done	es, " describe			
13	in Schedule O how this is done  Does the organization have a written which belower policy?	******************************	. 12c	X	
14	Does the organization have a written whistleblower policy?	***************************************	. 13	X	**********
15	Does the organization have a written document retention and destruction policy?		. 14	X	
10	Did the process for determining compensation of the following persons include a review and approval by	y independent			
~	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
h	The organization's CEO, Executive Director, or top management official	*****************************	15a		X
N.	Other officers or key employees of the organization		15b		X
160	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				
·Va	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement taxable entity during the year?	nt with a			
h			16a		X
IJ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evalua	te its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organizacement status with respect to such arrangements?	zation's		j	
Sect	exempt status with respect to such arrangements? ion C. Disclosure		16b		of the section of the
		Value of the second of the sec	· · · · · · · · · · · · · · · · · · ·		
17 18	List the states with which a copy of this Form 990 is required to be filed TN, PA, WA, WI				
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50	01(c)(3)s only) availabl	e for		
	public inspection. Indicate how you make these available. Check all that apply.  Own website  Another's website  X Upon request				
10	- Chottledgest				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conf	lict of interest policy, a	and finan	cial	
	statements available to the public.				
20	State the name, physical address, and telephone number of the person who possesses the books and r ${\tt Mary\ Jo\ Pribble\ -\ 630-668-3328}$	ecords of the organiza	ation: ⊳		
	25W560 Geneva Rd, Carol Stream, IL 60188				

36-4460995

# Form 990 (2009) Studies, Jerusalem, USA Inc. Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter  $\cdot 0 \cdot$  in columns  $(\tilde{D})$ , (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not		ny c	urre	nt of	ffice	r, diı	recto	or, or trustee.		
(A)	(B)		(C)		(D)	(E)	(F)			
Name and Title	Average				sitio			Reportable	Reportable	Estimated
	hours	(0	chec	k all	tha	t app	oly)	compensation	compensation	amount of
	per week	ector						from the	from related	other
	W SOR	or dir	g			ated		organization	organizations (W-2/1099-MISC)	compensation from the
		ustee	truste		8	bens		(W-2/1099-MISC)	(17 27 1000 10100)	organization
		lual t	tional		nploy	st con				and related
		Individual trustee or director	Institutional trustee	Officer	(ey er	Highest compensated employee	Former			organizations
James Galvin		-	-		-	-	-			And the second s
Chairman	5.00	X		X				0.	0.	0
Rolf-Gunnar Heitmann		-	1	2.5		<del>                                     </del>	†  –	0.	V	0.
Secretary	5.00	X		Х				0.	0.	0.
Bill Van Loon							-		V	V e
Treasurer	5.00	X		X				0.	0.	0.
Per Reinert Ericksen										V s
Director	5.00	X						0.	0.	0.
John Sode-Woodhead										
Director	5.00	X						0.	0.	0.
				-					***************************************	
				$\dashv$	-		$\dashv$			
			$\neg$		$\neg$	_			And the second s	
			-							
		_								
			-							
		-	-	_		_	_			
				- -	$\dashv$	+	-			
		+	+	+			+			
		+	$\dashv$		+	$\dashv$	+			

P	art VII Section A. Officers, Directors, Tr	ustees, Key E	mpl	oye	es, a	ind	High	<u>iest</u>	Compensated Employ	yees (continued	)			age
	<b>(A)</b> Name and title	(B) Average hours	(с		Pos		n app	oly)	(D) Reportable compensation	(E) Reportable compensation		1	(F) stima moun	ted
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from relate organizatio (W-2/1099-M	ns	org	othe npens from ti ganiza ad rela aniza	atior he ation ated
										- North American			·	
										Section of the sectio			·	
				-		-				The second section is a second se	<del></del>			***************************************
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										The second secon	A TOTAL CONTRACT	SWOTE		
····				$\dashv$	+		_			The second secon	×	**********	The state of the s	
				-			+			THE RESERVE OF THE SECOND SECO				-
	Total							1	0.		0.		· · · · · · · · · · · · · · · · · · ·	0 .
2	Total number of individuals (including but no compensation from the organization	ot limited to the	ose II	stec	abo	ove)	who	o rec	ceived more than \$100,	000 in reportabl	a			(
3	Did the organization list any former officer, o	director or trus	tee,	key	emp	oloye	e, o	r hig	ghest compensated em	ployee on	ſ		Yes	No
4	line 1a? If "Yes," complete Schedule J for su For any individual listed on line 1a, is the sur	n of reportable	con	nper	nsati	ion a	and	othe	er compensation from the	ne organization	- 1	3		X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or ac	ccrue compens	atio	n fro	e Sc om a	ny u	<i>lule i</i> unrel	<i>J for</i> lated	such individual d organization for servic	es rendered to		4		X
Sec	the organization? If "Yes," complete Schedu tion B. Independent Contractors	le J for such po	ersoi	η	•••••		wate	MAAAA			<u></u>	5		X
1	Complete this table for your five highest comthe organization. <b>NONE</b>	pensated inde	pen	den	t cor	ntra	ctors	s tha	at received more than \$	100,000 of com	pensa	tion fr	om	
	(A) Name and business a	ddress							<b>(B)</b> Description of se	rvices	Co	(C) mpen		
								_						
					,			-						
								-				· · · · · · · · · · · · · · · · · · ·		
				······································				-					····	
	Total number of independent contractors (inc	duding but not	limit	-ord +	0 th		lioto	d at	oovo) who received	ro than				
	\$100,000 in compensation from the organizar		111111	Ju L	o un	0	11318	u aL	ove) who received mo!	o (IIdii		- The instance		NA THE REAL PROPERTY.
											Fo	orm <b>9</b> 9	90 (20	009)

Caspari Center for Biblical and Jewish Form 990 (2009) Studies, Jerusalem, USA Inc. 36-4460995 Part VIII Statement of Revenue Page 9 (A) (B) (C) (D) Revenue Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns Membership dues .....1b c Fundraising events ..... 1c d Related organizations ..... e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 11 199623. g Noncash contributions included in lines 1a-1f; \$\_ h Total. Add lines 1a-1f 199623. **Business Code** Program Service 2 a Diaspora Program 900099 7694. 7694. ь Mishkan Journal 900099 698. 698. f All other program service revenue ..... Total, Add lines 2a-2f ..... 8392. Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties .... 5 (i) Real (ii) Personal 6 a Gross Rents ..... b Less: rental expenses ...... Rental income or (loss) ..... d Net rental income or (loss) .. 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses ...... c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 ..... a b Less: direct expenses ..... b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 ......a b Less: direct expenses \_\_\_\_\_ b c Net income or (loss) from gaming activities .............. 10 a Gross sales of inventory, less returns and allowances ...... a 4266. b Less: cost of goods sold ..... b 1919. c Net income or (loss) from sales of inventory ... 2347. 2347 Miscellaneous Revenue **Business Code** 11 a Reimbursements 900099 152. 152 d All other revenue e Total. Add lines 11a-11d ...... 152. Total revenue. See instructions. 210514. 10891 0.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D),

	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	57617.	45733.	6122.	5762
7	Other salaries and wages	37773.	21040.	13910.	2823
8	Pension plan contributions (include section 401(k)				with G feet of
	and section 403(b) employer contributions)				
9	Other employee benefits				The state of the s
10	Payroll taxes				Name of the second seco
11	Fees for services (non-employees):				- Water and the same of the sa
а	Management				
b	Legal			The state of the s	THE PERSON NAMED IN THE PE
С	Accounting	5400.	***************************************	5400.	
d	Lobbying		***************************************		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
2	Advertising and promotion			WOOTH	
3	Office expenses	5256.		4827.	429.
4	Information technology	32301		TE V & 1 8	247
5	Royalties			The second secon	
6	Occupancy	8841.	5313.	3528.	
	Travel	6336.	6336.	7740 8	
	Payments of travel or entertainment expenses	0000	03300		
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	9992.	6995.	2098.	900
		22226	0,0,0,0,0	<u> </u>	899.
-	Payments to affiliates			A CONTRACTOR OF THE PARTY OF TH	
5	Depreciation, depletion, and amortization	1246.		1246.	
	Insurance	77.4.0.0		<u> </u>	
4	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Leadership training	27500.	27500.		
	Youth resource material	23746.	23746.		
	JBJ Project	11000.	11000.		
	Newsletter	7028.			7028.
	Diaspora	5067.	5067.		1040.
	All other expenses	6873.	975.	5898.	
	Total functional expenses. Add lines 1 through 24f	213675.	153705.	43029.	16941.
	loint costs. Check here if following	m # J / J / J	2001000	200430	エロラゼエ。
	SOP 98-2. Complete this line only if the organization				
	eported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			49776.	1	31881
	2	Savings and temporary cash investments	******************			2	
	3	Pledges and grants receivable, net	****************			3	
	4	Accounts receivable, net	**************			4	
	5	Receivables from current and former officers, d	irectors, tru	stees, key			
		employees, and highest compensated employe	es. Comple	te Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 49					
		Part II of Schedule L			·	6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			2244.	8	2041
eq.	9	Prepaid expenses and deferred charges	· · · · · · · · · · · · · · · · · · ·			9	· · · · · · · · · · · · · · · · · · ·
	10a	, 5,,					
		basis. Complete Part VI of Schedule D					
	b			9585.	3946.	10c	2700.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	•••••		Control of the contro	15	
	16	Total assets. Add lines 1 through 15 (must equal			55966.	16	36622.
	17	Accounts payable and accrued expenses			7383.	17	100.
	18	Grants payable				18	240 mm - 1944 (1945)
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete F				21	W-900
Liabilities	22	Payables to current and former officers, director					
ĮĮ.		highest compensated employees, and disqualified	•	·			
ector.		of Schedule L			8900.	THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities. Complete Part X of Schedule D			1 ( 0 0 0	25	4.00
-	26	Total liabilities. Add lines 17 through 25			16283.	26	100.
		Organizations that follow SFAS 117, check he	re 🔛 ∟⊼	」 and complete			
Net Assets or Fund Balances	07	lines 27 through 29, and lines 33 and 34.			6050		1.6550
Ē	27 28	Unrestricted net assets		-6852.	27	16758.	
n	29	Temporarily restricted net assets  Permanently restricted net assets		46535.	28	19764.	
š		Organizations that do not follow SFAS 117, ch				29	
<u> </u>		complete lines 30 through 34.	eck nere	and	*		
ည္သ		Capital stock or trust principal, or current funds				00	
SSe	31	Paid-in or capital surplus, or land, building, or equ	inment fun	4		30	
3		Retained earnings, endowment, accumulated inc				31 32	A CONTRACTOR OF THE PARTY OF TH
2		Total net assets or fund balances			39683.	33	36530
	34	Total liabilities and net assets/fund balances	***************		77 FM A 47 44	34	36522. 36622.

Form 990 (2009) Studies, Jerusalem, USA Inc. 36-4460995 Page 12 Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Were the organization's financial statements audited by an independent accountant? 2b If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2009)

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### SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Caspari Center for Biblical and Jewish

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2009

Studies, Jerusalem, USA Inc.

Reason for Public Charity Status (All organizations must complete this part.) See instructions. 36-4460995 Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 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.) 9 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I **b** Type ii c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the organization in col. (i) organized in the (i) Name of supported (iv) Is the organization (v) Did you notify the (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes No No Yes

Form 990 or 990-EZ.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

36-4460995 Page 2

Schedule A (Form 990 or 990 EZ) 2009 Studies, Jerusalem, USA Inc

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 197374 297586. 294725. 153316. 199653. 1142654. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 ...... 197374 297586. 294725 153316. 199653. 1142654. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 8947. 1133707. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 153316 197374 297586 294725 199653 7 Amounts from line 4 1142654. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ... Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 1142654. Gross receipts from related activities, etc. (see instructions) 228519. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 % 99.57 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization \_\_\_\_\_\_ b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2009

(f) Total
(f) Total
11) TOTAL
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### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

Name of the organization

Caspari Center for Biblical and Jewish Studies, Jerusalem, USA Inc.

Employer identification number

36-4460995

Organization type (check	one):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
For an organization contributor. Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one lete Parts I and II.
Special Rules	
509(a)(1) and 170(l	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, itions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or truelty to children or animals. Complete Parts I, II, and III.
contributions for us If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions of \$5,000 or more during the year.
but it must answer "No" on	eat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certifying requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Part IV, line 6, 7, 8, 9, 10, 11, or 12. Open to Inspections.

2009
Open to Public Inspection

Name of the organization

Caspari Center for Biblical and Jewish
Studies, Jerusalem, USA Inc.

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

(a) Donor advised funds

(b) Funds and other accounts

1 Total number at end of year

2 Aggregate contributions to (during year)

3 Aggregate grants from (during year)

4 Aggregate value at end of year

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Yes No

	00 0			
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ful			
	are the organization's property, subject to the organization's exclusive legal control?		Yes	□ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only		
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	rring		
<del></del>	impermissible private benefit?		Yes	Nc
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	, line 7		
1	Purpose(s) of conservation easements held by the organization (check all that apply).			
	Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historica	lly imp	ortant land area	
	Protection of natural habitat Preservation of a certified h	istoric	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation contribution contribution in the form of a conservation contribution contributi	onserv	ation easement on	the last
	day of the tax year.			
			Held at the End of ti	ne Tax Year
а	Total number of conservation easements	2a		
b	Total acreage restricted by conservation easements	2b		
c	Number of conservation easements on a certified historic structure included in (a)	2c	The state of the s	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	With the state of	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	Pulling Strawn Commence	during the tax	
	year >			
4	Number of states where property subject to conservation easement is located			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements it holds?		Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during t			140
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E		Particular de la constantina della constantina d	_
	and section 170(h)(4)(B)(ii)?		Yes	☐ No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense states			
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's		•	
	conservation easements.	,		•
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Simila	ar Assets.	***************************************
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.			
			······································	
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance	sheet	works of art, histori	cal
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public ser		•	
	the footnote to its financial statements that describes these items.		,	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance she	et work	s of art. historical t	reasures.
	or other similar assets held for public exhibition, education, or research in furtherance of public service, provide			
	these items:			olding to
	(i) Revenues included in Form 990, Part VIII, line 1	<b>&gt;</b> 9	3	
	(ii) Assets included in Form 990, Part X		}	
	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p			***************************************
	the following amounts required to be reported under SFAS 116 relating to these items:		:	
	Revenues included in Form 990, Part VIII, line 1	<b>▶</b> \$		
	Assets included in Form 990, Part X		,	
		₽ Ψ		

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distriction of the last of the		s, Jerusale			A11	3	<u>6-44</u>	<u>6099</u>	<u>5</u> F	age 2		
L	0.90											
3	Using the organization's acquisition, access	sion, and other recor	ds, check any of th	e following th	at are a s	significant u	se of its	collectio	n iter	ทร		
	(check all that apply):		d Loan or ex	change prog								
k												
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.											
5												
D-								Yes		<u>  No</u>		
1 - 6	reported an amount on Form 990, Pa		lete if organization	answered "Ye	es" to For	rm 990, Part	IV, line	9, or				
						h !!!						
18	Is the organization an agent, trustee, custoo							٦.,		٦		
	on Form 990, Part X?						🖵	Yes	<u> </u>	_l No		
10	If "Yes," explain the arrangement in Part XIV	and complete the fo	bllowing table:			[	·					
	Danimira Iralana							Amoun <sup>-</sup>	<u>i</u>			
	Beginning balance											
d	Additions during the year											
e	Distributions during the year											
f O-	Ending balance	000 Dart V Ba		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1f		1.,		٦		
2a	*		217				,	Yes	L	l No		
-	rt V Endowment Funds. Complete		anne de live ell de l'		N/ Ung d		Military - Company of the Company		************	EUROPE STORY OF		
ra	Tt a Lindovanient Fands. Complete											
	Contrator of complete and	(a) Current year	(b) Prior year	(c) I wo yea	ITS DACK	(d) Three yea	is back	(e) rour	years	Dack		
1a	Beginning of year balance											
b	Contributions			<del></del>				<del></del>				
C	Net investment earnings, gains, and losses			<u> </u>				V==				
d	Grants or scholarships							***************************************		***************************************		
е	Other expenditures for facilities											
	and programs							***************************************				
f	Administrative expenses					**************************************						
g	End of year balance											
2	Provide the estimated percentage of the year											
a	Board designated or quasi-endowment		_%									
b	Permanent endowment	······································										
C		%										
За	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	and administe	ered for th	ne organizati	ion	Г				
	by:								Yes	No		
	(i) unrelated organizations		•••••			• • • • • • • • • • • • • • • • • • • •	•••••	3a(i)		***********		
	(ii) related organizations			• • • • • • • • • • • • • • • • • • • •			•••••	3a(ii)				
	If "Yes" to 3a(ii), are the related organizations				••••••			3b				
Par	Describe in Part XIV the intended uses of the tVI Investments - Land, Building			Don't V Boo	10				A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	-		
n car		· · · · · · · · · · · · · · · · · · ·						. D. F31-				
	Description of investment	(a) Cost or of basis (investm				Accumulated epreciation		(d) Book value				
	Land		Jasis	(00101)	ual	NOIGHIOH		,				
	Land				<del> </del>	**************************************			-			
	Buildings				<del></del>		_			-		
	Leasehold improvements											
	Equipment Other	i i		12285.		9585			277	00.		
	Add lines 1a through 1e. (Column (d) must e		X column (P) line 1			2200	>		270			
i Vicili	A NOT THE CHOOSE TO COMMITTED THOSE OF	guari viiri 000, i all /	y column (D), mic i	V1V/·/					411	2 U 0		

Schedule D (Form 990) 2009

Caspari Center for Biblical and Jewish Studies Jerusalem 1922 Ter

ee Form 990, Part X, line	12.	<del></del>	<u> </u>	raye
(b) Book value				
		The country of the co		
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See Form 990, Part X, line	13.			-
(b) Book value				
(5) 55011 14145	(	Cost or end-of-year ma	ırket value	
				***************************************
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75.)				
#IE 25.	(b) Amount			
	(b) / intoditi	-		
		1		
	See Form 990, Part X, line  (b) Book value  See Form 990, Part X, line  (b) Book value  15.  Description	Ree Form 990, Part X, line 12.  (b) Book value  Ree Form 990, Part X, line 13.  (b) Book value  (c)  15.  Description	See Form 990, Part X, line 12.  (b) Book value  (c) Method of value Cost or end-of-year m  See Form 990, Part X, line 13.  (c) Method of value Cost or end-of-year ma  (b) Book value  15.  Description	See Form 990, Part X, line 13.  (b) Book value  Cost or end-of-year market value  15.  Description  (b) Book value  15.  Description  (b) Book value

Schedule D (Form 990) 2009 Studies, Jerusalem, USA Inc. 36-4460995 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) ..... 210514 Total expenses (Form 990, Part IX, column (A), line 25) 2 2 213675. Excess or (deficit) for the year. Subtract line 2 from line 1 3 3 -3161.Net unrealized gains (losses) on investments 4 4 Donated services and use of facilities 5 5 Investment expenses \_\_\_\_\_ ദ 6 7 Prior period adjustments 7 Other (Describe in Part XIV.) 8 8 Total adjustments (net). Add lines 4 through 8 9 0. 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 -3161. 10 Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 212433. Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains on investments Donated services and use of facilities ..... 2b Recoveries of prior year grants d Other (Describe in Part XIV.) 2d e Add lines 2a through 2d 1919. 2e Subtract line 2e from line 1 210514. 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 210514 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 215594. Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities \_\_\_\_\_ 2a Prior year adjustments 2b Other losses \_\_\_\_\_ 2c d Other (Describe in Part XIV.) 2d Add lines 2a through 2d 1919. 20 Subtract line 2e from line 1 213675. Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. Part XII, Line 2d - Other Adjustments: Cost of sales: 1919. Part XIII, Line 2d - Other Adjustments: Cost of sales: 1919.

Caspari Center for Biblical and Jewish

# Schedule F (Form 990)

### Statement of Activities Outside the United States

 Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions. OMB No. 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Inspection Name of the organization Employer identification number Caspari Center for Biblical and Jewish Studies, Jerusalem, USA Inc. 36-4460995 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.) (b) Number of (a) Region (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or (by type) (i.e., fundraising, is a program service. expenditures in the region agents in program services, grants to describe specific type for region region recipients located in the region) of service(s) in region

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

Page 2

(i) Method of valuation (book, FMV, appraisal, other) Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance (g) Amount of o assistance non-cash 36-4460995 cash disbursement (f) Manner of 68646.Wire transfer of cash grant (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (d) Purpose of Studies, Jerusalem, USA Inc. mission support grant Caspari Israel Use Schedule F-1 (Form 990) if additional space is needed. Middle East and (c) Region North Africa (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2009 (a) Name of organization

Schedule F (Form 990) 2009

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

N

Studies, Jerusalem, USA Inc.

Schedule F (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. 36-4460995

Page 3

Use Schedule F-1 (Form 990) if additional space is needed.

(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 (c) Number of (d) Amount of recipients cash grant (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2009

### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

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

Attach to Form 990.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization Caspari Center

Caspari Center for Biblical and Jewish Studies, Jerusalem, USA Inc.

Employer identification number 36-4460995

Form 990, Part III, Line 4d, Other Program Services:
Desemination and teaching churchs and congregations regarding their
Jewish heritage and roots
Expenses \$ 113892. including grants of \$ 0. Revenue \$ 0.
Form 990, Part VI, Section B, line 11: Each director is provided a draft
of Form 990 prior to finalization and submission.
Form 990, Part VI, Section B, Line 12c: The monitoring of the conflict of
interest policy is performed annually
Form 990, Part VI, Section C, Line 19: Governing documents, conflict of
interest policy and financial statements are made available to the public
upon request

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(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an **Exempt Organization Return**

▶ File a separate application for each return.

OMB No. 1545-1709

<b>8</b>	If you are	e filing for an Automatic 3-Month Extension, complete only Part I and check this bo	ж		▶ Z					
Easter Contract	O HOL GOH	e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II unless you have already been granted an automatic 3-month extension on a	previously	of this form).	Ω					
	Part I	Automatic 3-Month Extension of Time. Only submit original (no copies ne	eded).	mod Form book						
A Pa	corporation	on required to file Form 990-T and requesting an automatic 6-month extension—chec	k this box	and complete	<b>~</b> —					
Ai tir	ll other co ne to file i	rporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.	7004 to re	quest an exter	nsion o					
ele ret	ectronicali turns, or a	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month at returns noted below (6 months for a corporation required to file Form 990-T). However if (1) you want the additional (not automatic) 3-month extension or (2) you file Form composite or consolidated Form 990-T. Instead, you must submit the fully completed at ore details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file	ever, you des 990-BL,	annot file Form 6069, or 8870	m 8868 , group					
	pe or int by the date for	Name of Exempt Organization Caspari Center for Biblical and Jewish Studies, Jerusalem, USA Inc.	Employer identification number 36 4460995							
File due		Number, street, and room or suite no. If a P.O. box, see instructions.  PO Box 147	30	4460995	<u>)</u>					
retu	g your ırn. See ructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  Carol Stream, IL 60189								
	Form 990 Form 990 Form 990 Form 990	D-BL Form 990-T (sec. 401(a) or 408(a) trust) D-EZ Form 990-T (trust other than above)		Form 4720 Form 5227 Form 6069 Form 8870	o o o o o o o o o o o o o o o o o o o					
<b>∌</b> T	he books	are in the care of ▶ M Pribble			-					
<ul><li>If</li><li>If</li><li>If</li></ul>	the orgar this is for the whole	No. ▶ ( 630 ) 668-3328 FAX No. ▶ ( )  nization does not have an office or place of business in the United States, check this a Group Return, enter the organization's four digit Group Exemption Number (GEN)_ group, check this box ▶ □ . If it is for part of the group, check this box . names and EINs of all members the extension will cover.	box . ,							
1	I reque until for the o ▶ ☑ ca	st an automatic 3-month (6 months for a corporation required to file Form August 15 , 20 10 , to file the exempt organization return for the organization reganization's return for:  alendar year 20 09 or  ax year beginning , 20 , and ending	named abo	ve. The extens	ion is					
2	If this tax	k year is for less than 12 months, check reason:   Initial return   Final return	Change i	n accounting p	eriod					
За	If this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, nonrefundable credits. See instructions.	3a	\$	0					
b	If this ap	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax s made. Include any prior year overpayment allowed as a credit.		\$	0					
W	Balance deposit v System).	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, vith FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment See instructions.	30	s	0					
Caul for p	t <b>ion.</b> If you ayment in	i are going to make an electronic fund withdrawal with this Form 8868, see Form 8455 structions.	3-EO and f	- form 8879-EO	~~~~					