* *	PUBLIC	DISCLOSURE	COPY	* *

Form	990-Т	E	Exempt Orga	inization Bus			ax Retur	n _	OMB No. 1545-0687	
		For ca	lendar year 2014 or other tax y				1 30. 201	15	2014	
								<u> </u>	ZU 14	
	tment of the Treasury al Revenue Service		 Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 							
A	Check box if		1	Check box if name c				DEmploye	er identification number vees' trust, see	
	address changed		JEWISH COMM	IUNITY CENTE	R OF	GREATER		instructi		
ΒE	xempt under section	Print	WASHINGTON					53-0205921		
X	501(c)(3)	10 TVDO		m or suite no. If a P.O. box	x, see ins	structions.		E Unrelate (See inst	ed business activity codes tructions.)	
	_408(e)220(e)	Туре	6125 MONTRO	DSE ROAD						
	408A 530(a)			ovince, country, and ZIP o	r foreign	postal code				
	_529(a)		ROCKVILLE,					5418	00	
	ok value of all assets end of year		p exemption number (See						-	
			k organization type 🕨			501(c) trust	401(a) trust		Other trust	
			ary unrelated business ac						37	
			poration a subsidiary in an		nt-subsic	liary controlled group?	►	Yes	X No	
			tifying number of the pare					201	001 0100	
	-		RUTH E. CARS				ne number		881-0100	
			de or Business In	come	-	(A) Income	(B) Expense	s	(C) Net	
	Gross receipts or sal									
b	Less returns and allo			c Balance b	10					
2			e A, line 7)		2					
3	Gross profit. Subtrac				3					
			ch Schedule D)		4a					
b			Part II, line 17) (attach For		4b					
C			sts		4c					
5			nips and S corporations (a		5					
6	Rent income (Schedu	, ,			6					
7			me (Schedule E)		7					
8			and rents from controlled	- , ,	8					
9			on 501(c)(7), (9), or (17)	- , , ,						
10			ome (Schedule I)		10	0 0 0 0	2 1		E 264	
11			e J)		11	8,920.	3,5	556.	5,364.	
12			ns; attach schedule)		12	0 0 0 0	<u> </u>	EC	E 264	
13			igh 12		13	8,920.	3,3	556.	5,364.	
Pa			ot Taken Elsewhe				income)			
14								14		
14			irectors, and trustees (Sch					14		
15								15 16		
16 17								17		
18								18		
19								19		
19 20	Charitable contribut	tione (So	e instructions for limitatio	n rules)				20		
20			562)					20		
21			n Schedule A and elsewhe					22b		
23								23		
24	Contributions to det	ferred co	ompensation plans					24		
25								25		
26			chedule I)					26		
27	Excess readership of	costs (Sc	chedule J)					27	5,364.	
28	Other deductions (a	ittach scl	hedule)			SEE STATE	MENT 1	28	1,500.	
29	Total deductions	s. Add lir	nes 14 through 28				······ · ·····	29	6,864.	
30	Unrelated business	taxable i	income before net operatir	ng loss deduction. Subtrac	ct line 29	from line 13		30	-1,500.	
31			n (limited to the amount o					31	<u> </u>	
32	Unrelated business	taxable i	income before specific dec	luction. Subtract line 31 fr	rom line :	30		32	-1,500.	
33			ly \$1,000, but see line 33 i					33	1,000.	
34			e income. Subtract line 33							
					-			34	-1,500.	
42370 01-13			Reduction Act Notice, se						Form 990-T (2014)	
510	201 78678	3 JC	CGW	2014.05060	47 JEW	ISH COMMUNI	FY CENTE			

11510201 786783 JCCGW

JEWISH	COMMUNITY	CENTER	OF	GREATER

Part III											
	Tax Computation										
35 Org	anizations Taxable as Corpora	tions. See instr	uctions for tax co	omputation.							
Con	ntrolled group members (section	ns 1561 and 15	63) check here 🕨	► 🗌 See	instructions a	ınd:					
a Ente	er your share of the \$50,000, \$2	25,000, and \$9,9	925,000 taxable i	ncome bracke	ets (in that ord	ler):					
(1)	\$	(2) \$		(3)	\$						
	er organization's share of: (1) A				\$						
	Additional 3% tax (not more that										
	ome tax on the amount on line 3								35c		
36 Tru	sts Taxable at Trust Rates. See	instructions fo	r tax computatior	n. Income tax	on the amoun	t on line 3	34 from:				
] Tax rate schedule or	Schedule D (Fo	orm 1041)						36		
37 Pro	xy tax. See instructions								37		
	rnative minimum tax								38		
	al. Add lines 37 and 38 to line 3								39		
	Tax and Payments		••								
	eign tax credit (corporations atta	ach Form 1118;	trusts attach For	m 1116)		40a					
	er credits (see instructions)								-		
c Gen	eral business credit. Attach For	m 3800				40c					
d Cre	dit for prior year minimum tax (a	attach Form 880	01 or 8827)			40d			-		
	al credits. Add lines 40a throug								40e		
	otract line 40e from line 39								41		
42 Oth	er taxes. Check if from: 🗌 Fo	orm 4255	Form 8611	Form 8697	Form 8	866	Other (attach s	schedule)	42		
								,	43		
	ments: A 2013 overpayment cr										
	4 estimated tax payments										
	deposited with Form 8868								-		
d Fore	eign organizations: Tax paid or v	withheld at sour	ce (see instructio	ons)		44d					
	kup withholding (see instruction										
	dit for small employer health ins										
	er credits and payments:	Filmer	orm 2439								
•	¬										
	Form 4136		ther		 Total ▶	44a					
	Form 4136 al payments . Add lines 44a thro	0 0	orm 2439 ther		Total 🕨	44g			45		
45 Tota	al payments. Add lines 44a thro	ougn 44g			<u>.</u>				45		
45 Tot a 46 Esti	al payments. Add lines 44a thro mated tax penalty (see instruction	ougn 44g ons). Check if F	orm 2220 is attac	ched 🕨 🗌]						
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45 Tota 46 Esti 47 Tax 48 Ove 49 Ente Part V 1 At any ti securitie Account 2 During the if YES, se 3 Enter the Schedule 1 Inventor 2 Purchas 3 Cost of I 4 a Additiona b Other co 5 Total. A Sign Here	Al payments. Add lines 44a thro mated tax penalty (see instruction a due. If line 45 is less than the to expayment. If line 45 is larger that er the amount of line 48 you want Statements Regardin me during the 2014 calendar ye is, or other) in a foreign country' is. If YES, enter the name of the e tax year, did the organization receive e instructions for other forms the orga e amount of tax-exempt interest A - Cost of Goods S y at beginning of year es labor	H	orm 2220 is attact and 46, enter amon ines 43 and 46, enter 2015 estimated to Activities a nization have an in ganization may have there ▶ m, or was it the gran to file. crued during the to ethod of invent ethod of invent d this return, includi an taxpayer) is based Date	ched ► ount owed nter amount o tax ► and Other interest in or a ave to file Forr ntor of, or transfe tax year ► \$ ory valuation 6 Invento 7 Cost of from lin 8 Do the propert the org	verpaid Informat a signature or m FinCEN Forn ror to, a toreign b ▶ N/ ory at end of y f goods sold. ne 5. Enter hei rules of section ty produced on anization? 	tion (see other autil m 114, Re trust? A ear Subtract I re and in I on 263A (' r acquirec d statement arer has an F INAJ R	Refunded e instructions hority over a fir port of Foreigr ine 6 Part I, line 2 with respect to d for resale) ap s, and to the bes k, nowledge. NCIAL Check self- e	ply to	46 47 48 49 count (ba d Financia d Financia d Financia d Financia d Financia d Financia d Financia d Financia d Financia d Financia	d belief, it is tr discuss this i shown below $\sum X Yes$ 0 6 3 9 0	Yes rue, return w / (see 3) 5 3 3
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JEWISH CO	OMMUNITY	CENTER	OF.	GREATER

Form 990-T (2014) WASHINGTON

53-0205921

Page 3

. Description of property									
(1)									
(2)									
(3)									
4)	2 . F	Rent received or accrue	d				1		
(a) From personal property (if the	percentage of	of (b) F	rom real ar	nd personal proper	y (if the perce	ntage	3(a) Deductions dire	ectly con	nected with the income in b) (attach schedule)
rent for personal property is m 10% but not more than 5	ore than 0%)	` ´o	f rent for pe	ersonal property ex t is based on profit	ceeds 50% or	f		u) unu 2(b) (attabili boliodalo)
1)									
2)									
3)									
4)		0. Total							
otal	0(0) 000	-				0.	(b) Total deduction	s	
) Total income. Add totals of columr re and on page 1, Part I, line 6, colu						0.	Enter here and on page Part I, line 6, column (B)	1	
chedule E - Unrelated D	ebt-Fin	anced Incom	e (see i	instructions)		0.			
			0001				3. Deductions directly	connect	ed with or allocable
				 Gross inc or allocable 	to debt-	(2)	to debt-fi		(b) Other deductions
1. Description of debt	-financed pr	roperty		financed p		(a)	(attach schedule)	'	(attach schedule)
)									
)						_			
)						_			
.) 4. Amount of average acquisition	5	Average adjusted ba	sis	6. Column	divided	_	7. Gross income		8. Allocable deduction
debt on or allocable to debt-financed property (attach schedule)		of or allocable to debt-financed proper		by colu			reportable (column 2 x column 6)		(column 6 x total of colur 3(a) and 3(b))
-·- ··) (··-···)		(attach schedule)	- 7				2 x column o)		5(a) and 5(b))
)					%				
)					%				
					%				
4)					%	_			
							nter here and on page 1, Part I, line 7, column (A).		Enter here and on page 1 Part I, line 7, column (B).
otals								0.	
otal dividends-received deductions									
chedule F - Interest, Anr	nuities,	Royalties, ar	nd Ren	nts From Co	ontrolle	d Orga	nizations (see i	nstruc	tions)
			Exemp	t Controlled O	rganizatior	าร			
1. Name of controlled organization	F,	2. mployer identification	Netun	3. arelated income		4. specified	5. Part of column included in the cor	4 that is	6. Deductions directly connected with income
		number	(loss) (s	see instructions)		nts made	organization's gross		
<u>۱</u>									
) !)									
)))									
)									
onexempt Controlled Organization	ons								·
7. Taxable Income 8		ated income (loss)	9 . Tot	tal of specified pay made	ments 1	0. Part of	column 9 that is included trolling organization's	11.	Deductions directly connective with income in column 10
	(see ir	nstructions)		maue		in the con	pross income		with income in column 10
)									
2)									
3)									
4)						۸ ما ما	olumns 5 and 10.	-	Add columns 6 and 11.
							and on page 1, Part I,	Ent	er here and on page 1, Part
					1			1	
						line	e 8, column (A).		line 8, column (B).
otals					►	line	e 8, column (A).		line 8, column (B).

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49 2014.05060 JEWISH COMMUNITY CENTER **CFOP**CGW_1 Form 990-T (2014) WASHINGTON

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

· · · · · · · · · · · · · · · · · · ·				
1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).
Totals	▶ 0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.
Fotals 🚺	• 0.	0.				0

Schedule J - Advertising income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)]
(3)						
(4)						
Totals (carry to Part II, line (5)) ►	0.	0.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Reader costs		 Excess readership costs (column 6 minus column 5, but not more than column 4). 	
(1) CENTER SCENE AND								
(2) PROGRAM GUIDES	8,920.	3,556.	5,364.	15,751.	82,1	104.	5,364.	
(3)								
(4)								
Totals from Part I	0.	0.					0.	
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).					Enter here and on page 1, Part II, line 27.	
Totals, Part II (lines 1-5) 🕨	8,920.	3,556.					5,364.	
Schedule K - Compensatio	Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)							
1. Name			2. Title	3. Perce time devot busine	ed to		ensation attributable related business	
(1)					%			

1. Name	2. Title	business	to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		►	0.

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FORM 990-T	OTHER DEDUCTIONS	STATEMENT 1
DESCRIPTION		AMOUNT
TAX PREPARATION FEES		1,500.
TOTAL TO FORM 990-T, PAGE 1,	LINE 28	1,500.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/13 06/30/14	1,500. 1,500.	0. 0.	1,500. 1,500.	1,500. 1,500.
NOL CARRYOVER AVAILABLE THIS YEAR			3,000.	3,000.