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)

A For the 2010 calendar year, or tax year beginning 7/01, 2010, and ending 6/30, 2011

B Check if applicable:
- Address change
- Name change
- Initial return
- Terminated
- Amended return

Application pending

F Name and address of principal officer:
SAME AS C ABOVE

J Website: HTTP://WWW.JESSD.ORG

K Form of organization: Corporation

L Year of Formation: 1918

M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization’s mission or most significant activities: JEWISH FAMILY SERVICE PROVIDES PROGRAMS THAT ARE DIVERSE YET COMPLIMENTARY TO ADDRESS THE COMMUNITY’S GROWING HUMAN CARE NEEDS. SERVICES ARE AVAILABLE TO ALL IN NEED OF ASSISTANCE REGARDLESS OF RELIGION, RACE, ETHNICITY, NATIONALITY, AGE OR SEXUAL ORIENTATION.

2 Check this box □ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 33

4 Number of independent voting members of the governing body (Part VI, line 1b) 33

5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5

6 Total number of volunteers (estimate if necessary) 6

7a Total unrelated business revenue from Part VIII, column (C), line 12 0

7b Net unrelated business taxable income from Form 990-T, line 34 0

8 Contributions and grants (Part VIII, line 1h) 13,411,692

9 Program service revenue (Part VIII, line 2g) 1,005,869

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,188,928

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 755,701

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 16,160,522

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 971,138

14 Benefits paid to or for members (Part IX, column (A), line 4) 1,012,444

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 10,521,444

16a Professional fundraising fees (Part IX, column (A), line 11e) 9,792,749

16b Total fundraising expenses (Part IX, column (D), line 25) 646,292

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 4,217,418

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 15,486,931

19 Revenue less expenses. Subtract line 18 from line 12 1,179,217

20 Total assets (Part X, line 16) 25,236,403

21 Total liabilities (Part X, line 26) 23,763,523

22 Net assets or fund balances. Subtract line 21 from line 20 22,312,797

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Guinevere Kerstetter

CFO

Date

Print/Type preparer’s name

Julie A. Firl

Preparer’s signature

Date

1/25/12

Check □ if self-employed

PTIN

P00085551

May the IRS discuss this return with the preparer shown above? (see instructions)

[x] Yes [ ] No

BAA For Paperwork Reduction Act Notice, see the separate instructions.