

PENA BRIONES MCDANIEL & CO., P.C.  
4171 N. MESA, SUITE B-100  
EL PASO, TX 79902-1498  
915-542-1733

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Instructions for filing  
JEWISH FEDERATION OF EL PASO  
Form 990T - Exempt Organization Business Return  
for the period ended December 31, 2016

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Signature...

The original return should be signed (using full name and title)  
and dated on page 2 by an authorized officer of the organization.

Filing...

The signed return should be filed on or before November 15, 2017  
with...

Department of the Treasury  
Internal Revenue Service Center  
Ogden, UT 84201-0027

Payment of tax...

No payment of tax is required.

To document the timely filing of your tax return(s), we suggest that  
you obtain and retain proof of mailing. Proof of mailing can be  
accomplished by sending the tax return(s) by registered or certified  
mail (metered by the U.S. Postal Service) or through the use of an IRS  
approved delivery method provided by an IRS designated private  
delivery service.

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Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2016 or other tax year beginning 01/01, 2016, and ending 12/31, 2016.

2016

Department of the Treasury Internal 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).

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number (Employees' trust, see instructions.)

B Exempt under section 501(c)( ) 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

JEWISH FEDERATION OF EL PASO

Number, street, and room or suite no. If a P.O. box, see instructions.

74-1168038

7110 N. MESA STREET

City or town, state or province, country, and ZIP or foreign postal code

EL PASO, TX 79912-3651

541800

C Book value of all assets at end of year

F Group exemption number (See instructions.)

2,170,535.

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of SHIRLEY LEONHARDT Telephone number (915) 842-9554

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include 1a Gross receipts or sales, 2 Cost of goods sold, 3 Gross profit, 4a Capital gain net income, 5 Income (loss) from partnerships and S corporations, 6 Rent income, 7 Unrelated debt-financed income, 8 Interest, annuities, royalties, and rents from controlled organizations, 9 Investment income of a section 501(c)(7), (9), or (17) organization, 10 Exploited exempt activity income, 11 Advertising income, 12 Other income, 13 Total.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include 14 Compensation of officers, directors, and trustees, 15 Salaries and wages, 16 Repairs and maintenance, 17 Bad debts, 18 Interest (attach schedule), 19 Taxes and licenses, 20 Charitable contributions, 21 Depreciation, 22 Less depreciation claimed on Schedule A and elsewhere on return, 23 Depletion, 24 Contributions to deferred compensation plans, 25 Employee benefit programs, 26 Excess exempt expenses (Schedule I), 27 Excess readership costs (Schedule J), 28 Other deductions (attach schedule), 29 Total deductions, 30 Unrelated business taxable income before net operating loss deduction, 31 Net operating loss deduction, 32 Unrelated business taxable income before specific deduction, 33 Specific deduction, 34 Unrelated business taxable income.

Part III Tax Computation

Table with 4 columns: Line number, Description, Amount, and Total. Rows include 35 Organizations Taxable as Corporations, 36 Trusts Taxable at Trust Rates, 37 Proxy tax, 38 Alternative minimum tax, 39 Tax on Non-Compliant Facility Income, and 40 Total.

Part IV Tax and Payments

Table with 4 columns: Line number, Description, Amount, and Total. Rows include 41 Foreign tax credit, 42 Subtract line 41e from line 40, 43 Other taxes, 44 Total tax, 45 Payments, 46 Total payments, 47 Estimated tax penalty, 48 Tax due, 49 Overpayment, and 50 Enter the amount of line 49 you want.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Description, and Yes/No columns. Rows include 51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account... 52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?... 53 Enter the amount of tax-exempt interest received or accrued during the tax year.

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here DANIEL CHEJFEC 07/06/2017 EXECUTIVE DIRECTOR May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [ ] No

Paid Preparer Use Only Print/Type preparer's name RENE D PENA CPA Preparer's signature Date 05/15/2017 Check [ ] if self-employed PTIN P00533121 Firm's name PENA BRIONES MCDANIEL Firm's EIN 74-2642884 Firm's address 4171 N. MESA, SUITE B-100, EL PASO, TX 79902-1498 Phone no. 915-542-1733

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ▶

<b>1</b> Inventory at beginning of year . . . . .	<b>1</b>		<b>6</b> Inventory at end of year . . . . .	<b>6</b>	
<b>2</b> Purchases . . . . .	<b>2</b>		<b>7</b> <b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2. . . . .	<b>7</b>	
<b>3</b> Cost of labor . . . . .	<b>3</b>				
<b>4a</b> Additional section 263A costs (attach schedule) . . . . .	<b>4a</b>		<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? . . . . .		<b>Yes</b>
<b>b</b> Other costs (attach schedule) . . . . .	<b>4b</b>				<b>No</b>
<b>5</b> <b>Total.</b> Add lines 1 through 4b . . . . .	<b>5</b>				

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**  
(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

<b>(a)</b> From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	<b>(b)</b> From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	

**(c) Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) . . . . . ▶

**(b) Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ▶

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			<b>(a)</b> Straight line depreciation (attach schedule)	<b>(b)</b> Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> . . . . . ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
<b>Total dividends-received deductions</b> included in column 8 . . . . . ▶				

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals . . . . . ▶

**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 . . . . . ▶

**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.

Totals . . . . . ▶

**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)) . . . . .

**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. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) THE VOICE	23,405.	8,792.	14,613.		14,653.	14,613.
(2)						
(3)						
(4)						
<b>Totals from Part I.</b> . . . . . ▶						
	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.
<b>Totals, Part II (lines 1-5)</b> . . . . . ▶	23,405.	8,792.				14,613.

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2) ATCH 1		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 . . . . . ▶			

ATTACHMENT 1SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
EITAN LAVI 7110 N. MESA STREET EL PASO, TX 79912-3651	PRESIDENT	0	0.
DEBRA PAZOS 7110 N. MESA STREET EL PASO, TX 79912-3651	PRESIDENT ELECT	0	0.
KRISTIN KIMMELMAN 7110 N. MESA STREET EL PASO, TX 79912-3651	SECRETARY	0	0.
DORI FENENBOCK 7110 N. MESA STREET EL PASO, TX 79912-3651	IMMEDIATE PAST PRESIDENT	0	0.
DANIEL CHEJFEC 7110 N. MESA STREET EL PASO, TX 79912-3651	EXECUTIVE DIRECTOR	0	0.
LESLIE BECKOFF 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
JULIAN GONZALEZ HERRELL 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
MICHAEL GOPIN 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
DANIEL HAMICHA 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
PINHAS KACHEL 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.

ATTACHMENT 1 (CONT'D)SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
OPHRA LEYSER- WHALEN 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
JOHN MOYE 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
DR. MITCHELL PUSCHETT 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
SHELBY RUBIN 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
ROSE SCHECTER 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
BILL STEIN 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
RABBI BEN ZEIDMAN 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
RABBI LEVI GREENBERG 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
RABBI YISRAEL GREENBERG 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
RABBI STEPHEN LEON 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.



ATTACHMENT 1 (CONT'D)

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
SUE BENDALIN 7110 N. MESA STREET EL PASO, TX 79912-3651	ADMINISTRATIVE ASSISTANT	0	0.
SHIRLEY LEONHARDT 7110 N. MESA STREET EL PASO, TX 79912-3651	CONTROLLER	0	0.
PETER SVARZBEIN 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
JANET WECHTER 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
DAVID ZEEMONT 7110 N. MESA STREET EL PASO, TX 79912-3651	BOARD MEMBER	0	0.
DAVID KERN 7110 N. MESA STREET EL PASO, TX 79912-3651	JCRC CHAIR	0	0.
TOTAL COMPENSATION			<u>0.</u>