

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2006

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning 01-01-2006 and ending 12-31-2006

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Boys Town Jerusalem Foundation Of america inc america inc. Address: 1 Penn Plaza No 6250, New York, NY 10001.

D Employer identification number: 11-5324002. E Telephone number: (800) 469-2697. F Accounting method: Accrual.

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? No. H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? No. H(d) Is this a separate return filed by an organization covered by a group ruling? No.

G Web site: wwwboystownjerusalemorg

J Organization type (check only one): 501(c) (3)

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000.

I Group Exemption Number. M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF).

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 12,049,763

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events and activities, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets or fund balances at beginning of year, Other changes in net assets, Net assets or fund balances at end of year.

Part III Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22a Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22b Other grants and allocations (attach schedule) (cash \$ 4,426,381 noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22b	4,426,381	4,426,381		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees etc Listed in Part V - A (attach schedule)	25a	623,585	169,392	454,193	
b Compensation of former officers, directors, key employees etc listed in Part V - B (attach schedule)	25b				
c Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b and c	26	282,300	159,270	123,030	
27 Pension plan contributions not included on lines 25a, b and c	27	12,146	5,713	6,433	
28 Employee benefits not included on lines 25a - 27	28	11,237	5,286	5,951	
29 Payroll taxes	29	59,234	27,864	31,370	
30 Professional fundraising fees	30				
31 Accounting fees	31	119,565	119,565		
32 Legal fees	32	3,502	3,502		
33 Supplies	33	14,651	4,883	9,768	
34 Telephone	34	18,927	6,308	12,619	
35 Postage and shipping	35	89,239	29,743	59,496	
36 Occupancy	36	66,266	22,086	44,180	
37 Equipment rental and maintenance	37	8,261	2,753	5,508	
38 Printing and publications	38	310,183	103,384	206,799	
39 Travel	39	34,067	11,355	22,712	
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42				
43 Other expenses not covered above (itemize)	43g				
a Professional fees	43a	133,920	81,277	52,643	
b insurance	43b	9,068	3,022	6,046	
c bank charges	43c	6,786	6,786		
d miscellaneous	43d	8,169	2,723	5,446	
e publicity	43e	41,889	13,962	27,927	
f Other event costs	43f	82,549		82,549	
g	43g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	6,361,925	4,426,381	778,874	1,156,670

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? <input type="checkbox"/> Raise funds for the development of a comprehensive education program for disadvantaged boys, mainly at the large campus in Israel, Boys Town Jerusalem, All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a Support of comprehensive academic, religious and technological education to over 1000 disadvantaged boys from 45 countries at the Boys Town Jerusalem School in Israel (Grants and allocations \$ 4,426,381) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	4,426,381
b (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
c (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
d (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) <input type="checkbox"/>	4,426,381

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash—non-interest-bearing	23,221	45	20,590	
	46 Savings and temporary cash investments	1,235,519	46	472,624	
	47a Accounts receivable	47a			
	b Less allowance for doubtful accounts	47b		47c	
	48a Pledges receivable	2,819,429			
	b Less allowance for doubtful accounts	400,000	2,319,236	48c	2,419,429
	49 Grants receivable			49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a	
	b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)			50b	
	51a Other notes and loans receivable (attach schedule)	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges	211,335	53	56,261	
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	30,194,023	54a	26,810,207	
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b	
55a Investments—land, buildings, and equipment basis	55a				
b Less accumulated depreciation (attach schedule)	55b		55c		
56 Investments—other (attach schedule)			56 <input checked="" type="checkbox"/>	5,515,348	
57a Land, buildings, and equipment basis	57a				
b Less accumulated depreciation (attach schedule)	57b		57c		
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)	978,989	58 <input checked="" type="checkbox"/>	950,870		
59 Total assets (must equal line 74) Add lines 45 through 58	34,962,323	59	36,245,329		
Liabilities	60 Accounts payable and accrued expenses	373,778	60	394,086	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe <input type="checkbox"/> _____)	1,265,731	65 <input checked="" type="checkbox"/>	1,131,518	
66 Total liabilities Add lines 60 through 65	1,639,509	66	1,525,604		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	30,079,839	67	31,440,808	
	68 Temporarily restricted	2,025,125	68	2,051,185	
	69 Permanently restricted	1,217,850	69	1,227,732	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	33,322,814	73	34,719,725	
	74 Total liabilities and net assets / fund balances Add lines 66 and 73	34,962,323	74	36,245,329	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	7,758,836
b	Amounts included on line a but not on Part I, line 12		
1	Net unrealized gains on investments	b1	1,235,846
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify) _____	b4	272,363
	Add lines b1 through b4	b	1,508,209
c	Subtract line b from line a	c	6,250,627
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	
	Add lines d1 and d2	d	1,508,209
e	Total revenue (Part I, line 12) Add lines c and d	e	6,250,627

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	6,361,925
b	Amounts included on line a but not on Part I, line 17		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify) _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	6,361,925
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17) Add lines c and d	e	6,361,925

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

Table with 3 columns: Question (75a-75d), Yes, No. 75a: Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings. 75b: Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? 75c: Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? 75d: Does the organization have a written conflict of interest policy?

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation (If not paid enter -0-), (D) Contributions to employee benefit plans and deferred compensation plans, (E) Expense account and other allowances.

Part VI Other Information (See the instructions.)

Table with 3 columns: Question (76-81b), Yes, No. 76: Did the organization make a change in its activities or methods of conducting activities? 77: Were any changes made in the organizing or governing documents but not reported to the IRS? 78a: Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78b: If "Yes," has it filed a tax return on Form 990-T for this year? 79: Was there a liquidation, dissolution, termination, or substantial contraction during the year? 80a: Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80b: If "Yes," enter the name of the organization and check whether it is exempt or nonexempt. 81a: Enter direct or indirect political expenditures. 81b: Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)

		Yes	No
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		No
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	82b		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		No
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85 <i>501(c)(4), (5), or (6) organizations.</i> a Were substantially all dues nondeductible by members?	85a		
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
If "Yes," was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year.			
c Dues assessments, and similar amounts from members	85c		
d Section 162(e) lobbying and political expenditures	85d		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86 <i>501(c)(7) orgs.</i> Enter a Initiation fees and capital contributions included on line 12	86a		
b Gross receipts, included on line 12, for public use of club facilities	86b		
87 <i>501(c)(12) orgs.</i> Enter a Gross income from members or shareholders	87a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b		
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		No
b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI	88b		No
89a <i>501(c)(3) organizations</i> Enter Amount of tax imposed on the organization during the year under section 4911 <input type="text" value="0"/> , section 4912 <input type="text" value="0"/> , section 4955 <input type="text" value="0"/>			
b <i>501(c)(3) and 501(c)(4) orgs.</i> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		No
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text" value="0"/>			
d Enter Amount of tax on line 89c, above, reimbursed by the organization <input type="text"/>			
e <i>All organizations.</i> At any time during the tax year was the organization a party to a prohibited tax shelter transaction?	89e		No
f <i>All organizations.</i> Did the organization acquire direct or indirect interest in any applicable insurance contract?	89f		No
g <i>For supporting organizations and sponsoring organizations maintaining donor advised funds.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		No
90a List the states with which a copy of this return is filed <input type="text" value="NY,PA"/>			
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions)	90b		13
91a The books are in care of <input type="text" value="miriam salzer"/> Telephone no <input type="text" value="(732) 901-8561"/> 110 Hillside Boulevard Suite 14 Located at <input type="text" value="Lakewood, NJ"/> ZIP + 4 <input type="text" value="08701"/>			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	Yes	No
If "Yes," enter the name of the foreign country <input type="text"/>			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts			

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No

If "Yes," enter the name of the foreign country _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year **92** _____

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	26,075	
96 Dividends and interest from securities			14	1,408,500	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-14,299	
101 Net income or (loss) from special events			01	1,535,364	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				2,955,640	
105 Total (add line 104, columns (B), (D), and (E))					2,955,640

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI **Information Regarding Transfers To and From Controlled Entities** *Complete only if the organization is a controlling organization as defined in section 512(b)(13)*

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
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	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
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	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	Yes	No
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Please Sign Here

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.

***** Signature of officer	2007-11-15 Date
Ronald Gray executive director Type or print name and title	

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4			EIN
	LOEB & TROPER 655 THIRD AVENUE NEW YORK, NY 10017			Phone no (212) 867-4000

**SCHEDULE A
(Form 990 or
990EZ)**

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2006

Department of the
Treasury
Internal Revenue
Service

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization
Boys Town Jerusalem Foundation Of america inc
america inc

Employer identification number

11-5324002

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Rabbi David Herman 1 Penn plaza Ste 6250 NY, NY 10001	Regional director 35 00	60,000	0	0
Sofya Reyfman 1 Penn plaza Ste 6250 NY, NY 10001	AdminFinancial 35 00	54,640	5,512	0
Total number of other employees paid over \$50,000	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Loeb and Troper LLP 655 Third Avenue New York, NY 10017	AccountingAudit	69,500
Total number of others receiving over \$50,000 for professional services		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Custom Graphic Services Inc 11 Broadway Suite 700 New York, NY 10004	Creative designprinting	239,666
JESL Education Products	Consultants	52,643
Total number of other contractors receiving over \$50,000 for other services		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶\$ _____(Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	1		No
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</p> <p>a Sale, exchange, or leasing property?</p>	2a		No
<p>b Lending of money or other extension of credit?</p>	2b		No
<p>c Furnishing of goods, services, or facilities?</p>	2c		No
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	Yes	
<p>e Transfer of any part of its income or assets?</p>	2e		No
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)</p>	3a		No
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	3b	Yes	
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	3c		No
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	3d		No
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	4a		No
<p>b Did the organization make any taxable distributions under section 4966?</p>	4b		
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	4c		
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ 0 _____</p>			
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ 0 _____</p>			

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** 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 charitable, etc , 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) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	3,094,257	4,061,618	4,265,503	4,147,878	15,569,256
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose					0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,464,194	1,222,206	1,165,463	1,152,708	5,004,571
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	249,109	52,077	34,102	226,902	562,190
23 Total of lines 15 through 22	4,807,560	5,335,901	5,465,068	5,527,488	21,136,017
24 Line 23 minus line 17	4,807,560	5,335,901	5,465,068	5,527,488	21,136,017
25 Enter 1% of line 23	48,076	53,359	54,651	55,275	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a 422,720
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					26b 1,884,451
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 21,136,017
d Add Amounts from column (e) for lines	18 5,004,571	19 0			
	22	26b 1,884,451			26d 7,451,212
e Public support (line 26c minus line 26d total)					26e 13,684,805
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 6474 64 %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year (2005) _____ (2004) _____ (2003) _____ (2002) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add Amounts from column (e) for lines	15 _____	16 _____			
	17 _____	20 _____	21 _____		
d Add Line 27a total _____ and line 27b total _____					27c _____
e Public support (line 27c total minus line 27d total)					27d _____
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)					27e _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27f _____
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27g _____
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					27h _____

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.			

4-Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 13 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			
If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities			

Additional Data**Software ID:****Software Version:****EIN:** 11-5324002**Name:** Boys Town Jerusalem Foundation Of america inc
america inc**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Rabbi Ronald Gray 1 Penn plaza Suite 6250 New York, NY 10001	Executive director 35 00	250,000	51,299	0
Lee Bernstein 1 Penn plaza Suite 6250 New York, NY 10001	National Director - Development 35 00	100,000	15,360	0
Andrew Demchik 1 Penn plaza Suite 6250 New York, NY 10001	Executive director - regional 35 00	110,000	0	0
Robert Tropp 1 Penn plaza Suite 6250 New York, NY 10001	Executive director - regional 35 00	85,000	11,926	0
Josh S Weston 1 Penn plaza Suite 6250 New York, NY 10001	Honorary Chairman 0 50	0	0	0
Michael J Scharf 1 Penn plaza Suite 6250 New York, NY 10001	President 0 50	0	0	0
Raphael Benaroya 1 Penn plaza Suite 6250 New York, NY 10001	Chairman 0 50	0	0	0
Rabbi Moshe Linchner 1 Penn plaza Suite 6250 New York, NY 10001	Vice chairman 0 50	0	0	0
Frank Beckerman 1 Penn plaza Suite 6250 New York, NY 10001	Vice president 0 50	0	0	0
Lawrence B Diener 1 Penn plaza Suite 6250 New York, NY 10001	Vice president 0 50	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Leo Goldschmidt 1 Penn plaza Suite 6250 New York, NY 10001	Vice president 0 50	0	0	0
Donald L Solomon 1 Penn plaza Suite 6250 New York, NY 10001	Vice president 0 50	0	0	0
Dr Kenneth Garay 1 Penn plaza Suite 6250 New York, NY 10001	Treasurer 0 50	0	0	0
Marjorie Diener Blenden 1 Penn plaza Suite 6250 New York, NY 10001	Secretary 0 50	0	0	0
Albert J Ades 1 Penn plaza Suite 6250 New York, NY 10001	Board memberexecutive committee 0 25	0	0	0
Gilbert Aronowitz 1 Penn plaza Suite 6250 New York, NY 10001	Board memberexecutive committee 0 25	0	0	0
Jay Aronowitz 1 Penn plaza Suite 6250 New York, NY 10001	Board memberexecutive committee 0 25	0	0	0
Maria Finkle 1 Penn plaza Suite 6250 New York, NY 10001	Board memberexecutive committee 0 25	0	0	0
Joseph Garay 1 Penn plaza Suite 6250 New York, NY 10001	Board memberexecutive committee 0 25	0	0	0
Sam Gershwin 1 Penn plaza Suite 6250 New York, NY 10001	Board memberexecutive committee 0 25	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Milton Gralla 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Hugh Greenberg 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Menahem Z Gurman 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Oscar Heller 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Arthur H Joseph 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Gershon Rothstein 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Prof William Schwartz 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Isaac Suder 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
David Yagoda 1 Penn plaza Suite 6250 New York, NY 10001	Board member executive committee 0 25	0	0	0
Jack A Belz 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Carl Cohen 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Marc Cooper 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Sidney Cooperman 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Leslie L Dan 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Gabriel Erem 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Judge David B Follender 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Robert Goldberg 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Fred Goldsmith 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Alex Halberstein 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Hart N Hasten 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Malcolm Hoenlein 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
H Billi Ivry 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Joan Jakobovitz 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Robert Kaswell 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Dr Ira Kukin 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Henri Levit 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
H Irwin Levy 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
David S Mack 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Ruth Mack 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Barry Magarick 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Gary Eli Miller 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
John J Pomerantz 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Stanley M Rosenblatt 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Comr Isidore Schechter 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Robert Shamis 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Paul Sigel 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Eric Singer 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Benjamin Veit 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Gary Weiss 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Mayor Michael J Wildes 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Michael Wimpfheimer 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0
Evelyn Zimmerman 1 Penn plaza Suite 6250 New York, NY 10001	Board member 0 10	0	0	0

TY 2006 Cash Grants Paid Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Class of Activity	Recipient's name	Address	Amount	Relationship
Academic religious and technological education support and Renovations	Boys Town Jerusalem Israel - Kiryat Noar	20 Harav Frank Street Bayit Vegan, Jerusalem 96386 IS	4,426,381	

TY 2006 Gain/Loss from Sale of Public Securities Schedule

Name: Boys Town Jerusalem Foundation Of america inc
america inc

EIN: 11-5324002

Gross Sales Price: 5,715,732

Basis: 5,730,031

Sales Expenses: 0

Total (net): -14,299

TY 2006 Investments - Other Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Description	Book Value	Cost/FMV
Limited partnership investment	5,515,348	F

TY 2006 Other Assets Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Description	Beginning of Year Amount	End of Year Amount
Beneficial Interest in Remainder Trusts	978,989	950,870

TY 2006 Other Changes in Net Assets Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Description	Amount
Unrealized gain on investments	1,235,846
Change in value of trust agreements	77,240
Change in value of split-interest agreements	195,123

TY 2006 Other Liabilities Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Description	Beginning of Year Amount	End of Year Amount
Annuity obligations	1,265,731	1,131,518

TY 2006 Other Revenues Included Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Description	Amount
Change in value of trust agreements	195,123
CChange in value of split-interest agreements	77,240

TY 2006 Special Events Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Event Name	Gross Receipts	Contributions	Gross Revenue	Direct Expense	Net Income (Loss)
PHiladelphia events	177,025	0	177,025	58,618	118,407
Florida Event	60,079	0	60,079	1,288	58,791
Baltimore Event	25,051	0	25,051	4,400	20,651
Events	1,342,314	0	1,342,314	4,799	1,337,515

TY 2006 Other Income Schedule

Name: Boys Town Jerusalem Foundation Of america inc
 america inc

EIN: 11-5324002

Description	2003	2002	2001	2000	Total
Special Events	249,109	52,077	34,102	226,902	562,190