

Form **990**

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

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1 PENN PLAZA 6250
 City or town, state or country, and ZIP + 4
NEW YORK, NY 10001

D Employer identification number
11-5324002

E Telephone number
(800) 469-2697

G Gross receipts \$ **67,489,208.**

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.BOYSTOWNJERUSALEM.ORG**

K Type of organization: Corporation Trust Association Other ▶

L Year of formation: **1984** **M State of legal domicile:** **NY**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SUPPORTS BOYS TOWN JERUSALEM'S COMPREHENSIVE EDUCATION PROGRAM FOR DISADVANTAGED YOUTH.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	48
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	48
	5 Total number of employees (Part V, line 2a)	5	15
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	4,176,995.	5,534,105.
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7a)	1,614,352.	-139,104.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	84,410.	7,211.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,875,757.	5,402,212.
	13 Grants and similar amounts paid (Part IX, column (A), lines 13a-13c)	3,656,339.	4,475,712.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	928,430.	964,731.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25)	1,027,996.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	791,382.	843,784.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,376,151.	6,284,227.
19 Revenue less expenses. Subtract line 18 from line 12	499,606.	-882,015.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	36,680,957.	31,326,225.
	21 Total liabilities (Part X, line 26)	821,782.	690,658.
	22 Net assets or fund balances Subtract line 21 from line 20	35,859,175.	30,635,567.

Part II Signature Block

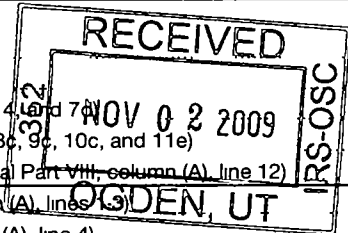
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ *Ronald Gray* Signature of officer Date **10-26-09**
RONALD GRAY, EXECUTIVE DIRECTOR
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature ▶ *L. Troper* Date **10/22/09** Check if self-employed Preparer's identifying number (see instructions)
 Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ **LOEB & TROPER LLP**
655 THIRD AVENUE, 12TH FLOOR
NEW YORK, NY 10017 EIN ▶ Phone no. ▶ **(212) 867-4000**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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FOUNDATION OF AMERICA, INC.

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission.
SEE SCHEDULE 'O'

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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 No

If "Yes", describe these changes on Schedule O.

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.

4a (Code.) (Expenses \$ 3,358,747. including grants of \$ 3,358,747.) (Revenue \$ 0.)
SUPPORTS BOYS TOWN JERUSALEM'S EDUCATIONAL PROGRAMS:

A. SCHOLARSHIPS FOR THE NEEDIEST STUDENTS: REMAINING TRUE TO ITS MISSION OF TURNING YOUNG BOYS FROM LIMITED CIRCUMSTANCES INTO YOUNG MEN WITH LIMITLESS FUTURES, BTJ PROVIDES SCHOLARSHIP/FINANCIAL ASSISTANCE TO OVER 75% OF ITS STUDENT BODY, MOST OF WHOM COME FROM ECONOMICALLY DISADVANTAGED FAMILIES. THIS VITAL SUPPORT ENSURES THAT NO STUDENT WHO QUALIFIES ACADEMICALLY IS DENIED A BOYS TOWN EDUCATION.

B. VOCATIONAL TRAINING: BTJ HAS EVOLVED FROM A MAKESHIFT TRADE SCHOOL TEACHING PRINTING AND CARPENTRY INTO A WORLD CLASS TECHNOLOGICAL CENTER, PREPARING STUDENTS FOR CAREERS IN THE 21ST CENTURY FIELDS OF ELECTRONICS, COMPUTER PROGRAMMING AND NETWORKING AND APPLIED ENGINEERING.

4b (Code) (Expenses \$ 380,000. including grants of \$ 380,000.) (Revenue \$ 0.)
SEE SCHEDULE 'O'

4c (Code.) (Expenses \$ 368,483. including grants of \$ 368,483.) (Revenue \$ 0.)
SUPPORTS BOYS TOWN JERUSALEM'S SUPPLEMENTAL ASSISTANCE FOR IMMIGRANT STUDENTS:

SINCE 2001, BOYS TOWN JERUSALEM HAS SERVED AS THE FIRST HOME IN ISRAEL FOR SOME OF THAT COUNTRY'S NEWEST CITIZENS - YOUNG IMMIGRANTS FROM FRANCE, THE FORMER SOVIET UNION AND MOST RECENTLY, ETHIOPIA. THESE YOUNG MEN LIVE AND STUDY AT BTJ WITHIN THE FRAMEWORK OF THE JEWISH AGENCY'S NAALEH PROGRAM, WHICH ENABLES TEENAGERS TO MAKE ALIYAH BEFORE, OR WITHOUT, THEIR PARENTS. BOYS TOWN PROVIDES THEM WITH ROOM AND BOARD 365 DAYS A YEAR, INCLUDING SPECIAL PROGRAMS AND ACTIVITIES DURING SCHOOL VACATIONS, MEDICAL SERVICES AND EVEN POCKET MONEY AND A GIFT ON THEIR BIRTHDAYS.

4d Other program services. (Describe in Schedule O)
(Expenses \$ 368,482. including grants of \$ 368,482.) (Revenue \$)

4e Total program service expenses ► \$ 4,475,712. (Must equal Part IX, Line 25, column (B))

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A .</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		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 reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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 credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	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? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
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>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
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 tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

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Part IV Checklist of Required Schedules *(continued)*

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	12		
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	15		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			
4a	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)?		X	
b	If "Yes," enter the name of the foreign country: ▶ ANTIGUA & BARBUDA, BERMUDA 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?			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			
6a	Did the organization solicit any contributions that were not tax deductible?			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?			X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			X
10	Section 501(c)(7) organizations. Enter: N/A			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter: N/A			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b		

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Section A. Governing Body and Management

		Yes	No
<i>For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</i>			
1a	Enter the number of voting members of the governing body	48	
1b	Enter the number of voting members that are independent	48	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O (see instructions)	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ▶ NY, PA, FL, NJ
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ MIRIAM SALZER - (732) 901-8561 110 HILLSIDE BOULEVARD, SUITE 14, LAKEWOOD, NJ 08701

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. 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, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RAPHAEL BENAROYA CHAIRMAN	0.20	X						0.	0.	0.
RABBI MOSHE LINCHNER CHAIRMAN OF THE EXECUTIV	0.20	X						0.	0.	0.
MARJORIE DIENER BLENDE SECRETARY	0.10	X						0.	0.	0.
LAWRENCE B. DIENER VICE PRESIDENT	0.10	X						0.	0.	0.
DR. KENNETH GARAY TREASURER	0.10	X						0.	0.	0.
LEO GOLDSCHMIDT VICE PRESIDENT	0.10	X						0.	0.	0.
MICHAEL J. SCHARF PRESIDENT	0.10	X						0.	0.	0.
DONALD L. SOLOMON VICE PRESIDENT	0.10	X						0.	0.	0.
JOSH S. WESTON HONORARY CHAIRMAN	1.00	X						0.	0.	0.
ALBERT J. ADES BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
GILBERT ARONOWITZ BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
JAY ARONOWITZ BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
MARIA FINKLE BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
JOSEPH GARAY BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
FRED GOLDSMITH BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
HUGH GREENBERG BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.
MENAHM Z. GURMAN BOARD MEMBER-EXECUTIVE C	0.10	X						0.	0.	0.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
OSCAR HELLER BOARD MEMBER-EXECUTIVE C	0.10	X					0.	0.	0.	
GERSHON ROTHSTEIN BOARD MEMBER-EXECUTIVE C	0.10	X					0.	0.	0.	
PROF. WILLIAM SCHWARTZ BOARD MEMBER-EXECUTIVE C	0.10	X					0.	0.	0.	
ERIC SINGER BOARD MEMBER-EXECUTIVE C	0.10	X					0.	0.	0.	
ISAAC SUDER BOARD MEMBER-EXECUTIVE C	0.10	X					0.	0.	0.	
ROBERT KASWELL VICE CHAIRMAN OF THE BOA	1.00	X					0.	0.	0.	
MAYOR MICHAEL J. WILDES VICE CHAIRMAN OF THE BOA	1.00	X					0.	0.	0.	
JACK A. BELZ BOARD MEMBER	0.10	X					0.	0.	0.	
CARL COHEN BOARD MEMBER	0.10	X					0.	0.	0.	
MARC COOPER BOARD MEMBER	0.10	X					0.	0.	0.	
1b Total							514,448.	0.	53,853.	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ 3

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
CUSTOM GRAPHIC SERVICES, INC. 11 BROADWAY, SUITE #700, NEW YORK, NY 10004	CREATIVE DESIGN/PRINTING	126,130.
JERRY TOLLINSKY T/A DEVELOPMENT MATTERS, 24 FRANMORE CIRCLE, THORNHILL, ON, CANADA	CONSULTANT FOR CANADIAN OFFICE	111,983.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ 2

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2008)

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Form 990 (2008)

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Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	91,516.					
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,442,589.					
	g Noncash contributions included in lines 1a-1f \$							
	h Total. Add lines 1a-1f			5534105.				
Program Service Revenue			Business Code					
	2 a _____							
	b _____							
	c _____							
	d _____							
	e _____							
	f All other program service revenue							
g Total. Add lines 2a-2f								
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			995,358.			995,358.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross Rents	(i) Real	(ii) Personal					
		b Less. rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		60,896,161.						
		b Less. cost or other basis and sales expenses						
		62,030,623.						
	c Gain or (loss)							
	-1,134,462.							
	d Net gain or (loss)				-1,134,462.		-1,134,462.	
	8 a Gross income from fundraising events (not including \$ 91,516. of contributions reported on line 1c) See Part IV, line 18	a			63,584.			
b Less direct expenses		b		56,373.				
c Net income or (loss) from fundraising events				7,211.			7,211.	
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							
	b Less cost of goods sold	b						
	c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a _____								
b _____								
c _____								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e				5402212.	0.	0.	-131893.	

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Form 990 (2008)

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Form 990 (2008)

11-5324002 Page 10

Part IX Statement of Functional Expenses

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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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	4,475,712.	4,475,712.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	348,152.		116,039.	232,113.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	512,932.		155,153.	357,779.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	9,560.		2,902.	6,658.
9 Other employee benefits	38,788.		11,773.	27,015.
10 Payroll taxes	55,299.		16,789.	38,510.
11 Fees for services (non-employees)				
a Management				
b Legal	23,941.		23,941.	
c Accounting	102,008.		102,008.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	59,483.		59,483.	
g Other	33,028.		33,028.	
12 Advertising and promotion	48,569.		16,188.	32,381.
13 Office expenses	205,885.		68,622.	137,263.
14 Information technology				
15 Royalties				
16 Occupancy	47,646.		15,880.	31,766.
17 Travel	12,148.		4,049.	8,099.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,560.		1,187.	2,373.
23 Insurance	3,102.		1,034.	2,068.
24 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.)				
a OTHER EVENT COSTS	151,971.			151,971.
b BAD DEBTS	135,100.		135,100.	
c BANK CHARGES	17,343.		17,343.	
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	6,284,227.	4,475,712.	780,519.	1,027,996.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Form 990 (2008)

11-5324002 Page 11

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	44,354.	1	21,175.
	2 Savings and temporary cash investments	2,576,329.	2	1,221,676.
	3 Pledges and grants receivable, net	2,014,367.	3	1,737,071.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	56,188.	9	54,739.
	10a Land, buildings, and equipment cost basis	10a 17,804.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 5,340.		
		16,024.	10c	12,464.
	11 Investments - publicly traded securities	25,250,533.	11	23,520,404.
	12 Investments - other securities. See Part IV, line 11	5,800,792.	12	3,761,863.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11	922,370.	15	996,833.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	36,680,957.	16	31,326,225.	
Liabilities	17 Accounts payable and accrued expenses	440,330.	17	355,262.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	381,452.	25	335,396.
	26 Total liabilities. Add lines 17 through 25	821,782.	26	690,658.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	33,224,535.	27	27,773,583.
	28 Temporarily restricted net assets	1,509,150.	28	1,920,330.
	29 Permanently restricted net assets	1,125,490.	29	941,654.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	35,859,175.	33	30,635,567.	
34 Total liabilities and net assets/fund balances	36,680,957.	34	31,326,225.	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	X	
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 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?	X	
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?		X
b	If "Yes," did the organization undergo the required audit or audits?		

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Form 990 (2008)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization **BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.** Employer identification number **11-5324002**

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is. (Please check only one organization.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 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 the Part III.)
- 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions)
- 11 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
 - d Type III - Other
- e 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)
- f 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
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

Part II 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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,061,618.	5,413,493.	3,328,258.	4,176,995.	5,534,105.	22,514,469.
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 - 3	4,061,618.	5,413,493.	3,328,258.	4,176,995.	5,534,105.	22,514,469.
5 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)						1,369,205.
6 Public Support. Subtract line 5 from line 4						21,145,264.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	4,061,618.	5,413,493.	3,328,258.	4,176,995.	5,534,105.	22,514,469.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,222,206.	1,464,194.	1,434,575.	1,614,352.	995,358.	6,730,685.
9 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						29,245,154.
12 Gross receipts from related activities, etc (see instructions)					12	2,183,447.
13 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	72.30 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	62.71 %
16a 33 1/3% support test - 2008. 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 <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2007. 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 <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2008. 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 <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2007. 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 <input type="checkbox"/>		
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 <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						

14 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

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization **BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.** Employer identification number **11-5324002**

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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part 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 historically important land area
- Protection of natural habitat Preservation of certified historic structure
- Preservation of open space
- 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a 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
d Number of conservation easements included in (c) acquired after 8/17/06	2d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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 statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar 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, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of 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 sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1125490.				
b Contributions					
c Investment earnings or losses	17,376.				
d Grants or scholarships					
e Other expenditures for facilities and programs	17,376.				
f Administrative expenses	183,836.				
g End of year balance	941,654.				

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		17,804.	5,340.	12,464.
e Other				0.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				12,464.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	5,402,212.
2	Total expenses (Form 990, Part IX, column (A), line 25)	6,284,227.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-882,015.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	-4,341,593.
9	Total adjustments (net) Add lines 4-8	-4,341,593.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	-5,223,608.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1,572,504.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	
a	Net unrealized gains on investments	2a
b	Donated services and use of facilities	2b
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV)	2d
e	Add lines 2a through 2d	2e 0.
3	Subtract line 2e from line 1	3 1,572,504.
4	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	4a
b	Other (Describe in Part XIV)	4b 3,829,708.
c	Add lines 4a and 4b	4c 3,829,708.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5 5,402,212.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	6,796,112.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities	2a
b	Prior year adjustments	2b
c	Losses reported on Form 990, Part IX, line 25	2c
d	Other (Describe in Part XIV)	2d 511,885.
e	Add lines 2a through 2d	2e 511,885.
3	Subtract line 2e from line 1	3 6,284,227.
4	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)	4b
c	Add lines 4a and 4b	4c 0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5 6,284,227.

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, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b

PART XI, LINE 8 - OTHER ADJUSTMENTS:

UNREALIZED LOSS ON INVESTMENTS

CHANGE IN VALUE OF REMAINDER TRUST

ACTUARIAL CHANGE IN VALUE OF ANNUITY OBLIGATIONS

IMPAIRMENT OF INVESTMENTS

PART XII, LINE 4B - OTHER ADJUSTMENTS:

Part XIV Supplemental Information (continued)

UNREALIZED LOSS ON INVESTMENTS: 3292289.

CHANGE IN VALUATION OF REMAINDER TRUST AGREEMENTS: 213805.

ACTUARIAL CHANGE IN VALUE OF ANNUITY OBLIGATIONS: 323614.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

IMPAIRMENT OF INVESTMENTS: 511885.

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 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	4,095,712.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	SCHOOL CONSTRUCTION	380000.	WIRE TRANSFER	0.		

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 1

3 Enter total number of other organizations or entities 0

Part IV Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

SCHEDULE F, PART I, LINE 2: ANY REQUEST FOR GRANT IS MADE TO THE BOARD OF DIRECTORS. THE REQUEST IS REVIEWED AND A DECISION IS RENDERED BY THE BOARD OF DIRECTORS. THE FOUNDATION REVIEWS MONTHLY, QUARTERLY, AND ANNUAL FINANCIAL REPORTS FROM THE GRANT RECIPIENT WHICH VERIFY THAT THE GRANT HAS BEEN APPLIED ACCORDING TO THE REQUEST.

PART I, LINE 3, COLUMN (E):

REGION: MIDDLE EAST AND NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: GENERAL SUPPORT FOR SCHOOL AND SPECIFIC ASSISTANCE TOWARDS CAPITAL CONSTRUCTION PROJECT.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Department of the Treasury
Internal Revenue Service

Name of the organization **BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.** Employer identification number **11-5324002**

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1b		
2	X	
4a		X
4b		X
4c		X
5a	X	
5b		X
6a		X
6b		X
7		X
8		X

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

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
RABBI RONALD GRAY	(i) 250,000.	(ii) 39,500.	(iii) 0.	17,500.	36,353.	343,353.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
LEE BERINSTEIN	(i) 115,000.	0.	0.	0.	20,338.	135,338.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ANDREW DEMCHIK	(i) 109,948.	0.	0.	0.	3,575.	113,523.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						
	(i) 0.						
	(ii) 0.						

BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 5: RABBI RONALD GRAY'S BONUS IS CONTINGENT UPON THE AMOUNT OF FUNDS HE RAISES IN THE COURSE OF THE YEAR. THIS IS INDICATED IN HIS CONTRACT.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization **BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.** Employer Identification number **11-5324002**

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SIDNEY COOPERMAN BOARD MEMBER	0.10	X						0.	0.	0.
LESLIE L. DAN BOARD MEMBER	0.10	X						0.	0.	0.
GABRIEL EREM BOARD MEMBER	0.10	X						0.	0.	0.
JUDGE DAVID B. FOLLENDER BOARD MEMBER	0.10	X						0.	0.	0.
ROBERT GOLDBERG BOARD MEMBER	0.10	X						0.	0.	0.
ALEX HALBERSTEIN BOARD MEMBER	0.10	X						0.	0.	0.
HART N. HASTEN BOARD MEMBER	0.10	X						0.	0.	0.
MALCOLM HOENLEIN BOARD MEMBER	0.10	X						0.	0.	0.
JOAN JAKUBOVITZ BOARD MEMBER	0.10	X						0.	0.	0.
ED KERSON BOARD MEMBER	0.10	X						0.	0.	0.
HENRI LEVIT BOARD MEMBER	0.10	X						0.	0.	0.
DAVID S. MACK BOARD MEMBER	0.10	X						0.	0.	0.
RUTH MACK BOARD MEMBER	0.10	X						0.	0.	0.
BARRY MAGARICK BOARD MEMBER	0.10	X						0.	0.	0.
JOHN J. POMERANTZ BOARD MEMBER	0.10	X						0.	0.	0.
STANLEY M. ROSENBLATT BOARD MEMBER	0.10	X						0.	0.	0.
ROBERT SHAMIS BOARD MEMBER	0.10	X						0.	0.	0.
BENJAMIN VEIT BOARD MEMBER	0.10	X						0.	0.	0.
MICHAEL WIMPFHEIMER BOARD MEMBER	0.10	X						0.	0.	0.
DAVID YAGODA BOARD MEMBER	0.10	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Employer identification number

11-5324002

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

BOYS TOWN JERUSALEM FOUNDATION OF AMERICA SUPPORTS THE FOLLOWING
PROGRAMS AT BTJ:

A. TUTORIAL PROGRAMS - BOYS TOWN'S PERCENTAGE OF STUDENTS PASSING THEIR
MATRICULATION EXAMS IS AMONG ISRAEL'S HIGHEST, REGULARLY OUTPERFORMING
TOP SECULAR AND RELIGIOUS HIGH SCHOOLS. TO ACHIEVE THOSE LOFTY RESULTS,
BOYS TOWN PROVIDES A REGULAR PROGRAM OF TUTORING FOR STUDENTS REQUIRING
ASSISTANCE IN ALL SUBJECT AREAS.

B. SUMMER ENRICHMENT PROGRAMS - BOYS TOWN'S BAYIT VEGAN CAMPUS IS
UTILIZED YEAR-ROUND. WHEN THE REGULAR SCHOOL YEAR CONCLUDES IN JUNE,
SPECIAL SUMMER PROGRAMS, EACH SPECIFICALLY DESIGNED TO BENEFIT A
PARTICULAR GROUP OF STUDENTS AND THEIR OWN SPECIAL NEEDS ARE CONDUCTED.
THESE INCLUDE DAY CAMPS FOR JUNIOR HIGH SCHOOL STUDENTS, WITH CLASSROOM
STUDY FOLLOWED BY SPORTS, CAMPING, FIELD TRIPS AND ACTIVITIES BOTH ON
AND OFF THE BTJ CAMPUS; TUTORING SESSIONS FOR HIGH SCHOOL STUDENTS TO
BOLSTER THEIR SKILLS IN SPECIFIC SUBJECT AREAS; AND ENRICHMENT CLASSES
FOR HIGH ACHIEVING HIGH SCHOOL STUDENTS.

EXPENSES \$ 368482. INCLUDING GRANTS OF \$ 368482. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY RABBI
GRAY IN COMPARISON WITH OUR AUDITED FINANCIAL STATEMENTS. IT IS THEN
REVIEWED BY ONE OF THREE EXECUTIVE OFFICERS AS WELL.

FORM 990, PART VI, SECTION B, LINE 12C: A CONFLICT OF INTEREST POLICY
APPLIES TO ALL OFFICERS AND TRUSTEES OF BOYS TOWN JERUSALEM FOUNDATION OF
AMERICA. THE BOOKKEEPER AND DIRECTOR OF DEVELOPMENT, UNDER THE GUIDANCE OF

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Employer identification number
11-5324002

THE BOARD OF DIRECTORS, CONTINUOUSLY MONITOR ALL TRANSACTIONS TO DETERMINE IF ANY POTENTIAL CONFLICT EXISTS.

IF IT IS DETERMINED BY ABOVE PERSONS THAT A POTENTIAL CONFLICT DOES EXIST, THE OFFICER OR TRUSTEE IS PROHIBITED FROM PARTICIPATING IN THE DELIBERATIONS AND DECISIONS IN THE TRANSACTION (IN THE CASE OF AN OFFICER HAVING SUCH POTENTIAL CONFLICT, THAT OFFICER WILL DELEGATE THE DECISION TO HIS ASSISTANT).

FORM 990, PART VI, SECTION B, LINE 15: LEGAL COUNSEL, JACOB HELLER, REVIEWS COMPARABLE DATA FROM OTHER ORGANIZATIONS TO DETERMINE COMPENSATION FOR THE EXECUTIVE V.P.

IN ADDITION, THE COMPENSATION COMMITTEE REVIEWS COMPARABLE DATA, INCLUDING EXECUTIVE SALARIES, OF OTHER SIMILAR ENTITIES.

ALL DISCUSSIONS OF THE COMPENSATION COMMITTEE AND THE BOARD OF DIRECTORS REGARDING COMPENSATION FOR KEY EMPLOYEES ARE RECORDED IN THE MINUTES OF THE BOARD MEETING.

FORM 990, PART VI, SECTION C, LINE 19:

BTJ ADVISES (ON ITS WEBSITE) THAT ANYONE WISHING TO ACCESS INFORMATION ABOUT BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.'S CONFLICT OF INTEREST POLICIES, GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS, SHOULD CONTACT THEM IN ANY OF THE FOLLOWING WAYS: (TEL)1-800-469-2697 OR (EMAIL) BTJNATIONAL@BOYSTOWNJERUSALEM.ORG.

FORM 990, PART XI, LINE 2C

AUDIT COMMITTEE

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Employer identification number
11-5324002

PROTOCOLS RELATING TO AUDIT OVERSIGHT HAVE NOT CHANGED FROM PRIOR YEAR.

FORM 990, PART III, LINE 4B

PROGRAM SERVICE ACCOMPLISHMENT #2

FORM 990, PART VI, LINE 9A

LOCAL CHAPTERS

FORM 990, PART III, LINE 1

ORGANIZATION'S MISSION

BOYS TOWN JERUSALEM FOUNDATION OF AMERICA SUPPORTS BOYS TOWN JERUSALEM (ISRAEL), ONE OF ISRAEL'S PREMIER INSTITUTIONS FOR EDUCATING THE COUNTRY'S NEXT GENERATION OF LEADERS IN THE FIELDS OF TECHNOLOGY, COMMERCE, EDUCATION, THE MILITARY AND PUBLIC SERVICE. SINCE ITS FOUNDING IN 1948, BTJ HAS PURSUED ITS MISSION OF TURNING YOUNG BOYS FROM LIMITED BACKGROUNDS INTO YOUNG MEN WITH LIMITLESS FUTURES. FROM JUNIOR HIGH THROUGH THE COLLEGE LEVELS, THE THREE PART CURRICULUM AT BOYS TOWN - ACADEMIC, TECHNOLOGICAL, AND TORAH STUDIES - IS DESIGNED TO TURN OTHERWISE DISADVANTAGED ISRAELI YOUTH INTO PRODUCTIVE CITIZENS OF TOMORROW. THE CAMPUS, LOCATED ON 18 BEAUTIFUL ACRES IN THE BAYIT VEGAN NEIGHBORHOOD OF JERUSALEM, OVERLOOKING THE JUDEAN HILLS, IS A HOME AWAY FROM HOME FOR STUDENTS FROM DIVERSE BACKGROUNDS, REPRESENTING THE ETHNIC MOSAIC THAT IS ISRAEL TODAY.

FORM 990, PART VI, LINE 1

COMMITTEE DETAIL

BOYS TOWN JERUSALEM'S BOARD CONTAINS A SUB-GROUP OF TRUSTEES WHO SIT ON

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

**BOYS TOWN JERUSALEM
FOUNDATION OF AMERICA, INC.**

Employer identification number

11-5324002

**THE EXECUTIVE COMMITTEE. ABOVE NOTWITHSTANDING, ALL TRUSTEES ENJOY
EQUAL VOTING RIGHTS.**

Multiple horizontal lines for supplemental information.

2008 DEPRECIATION AND AMORTIZATION REPORT
 FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	EQUIPMENT * TOTAL 990 PAGE 10 DEPR	VARIABLES		.000	16	17,804.		0.	17,804.	1,780.		3,560.
						17,804.			17,804.	1,780.	0.	3,560.

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Chartres & Nonprofits*

Type or print	Name of Exempt Organization BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.	Employer identification number 11-5324002
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions. 1 PENN PLAZA, NO. 6250	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10001	

Check type of return to be filed(file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

MIRIAM SALZER

- The books are in the care of ▶ **110 HILLSIDE BOULEVARD, SUITE 14 - LAKEWOOD, NJ 08701**
Telephone No ▶ **(732) 901-8561** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2009**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2008** or
▶ tax year beginning _____, and ending _____.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization BOYS TOWN JERUSALEM FOUNDATION OF AMERICA, INC.	Employer identification number 11-5324002
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 1 PENN PLAZA, NO. 6250	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10001	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

MIRIAM SALZER

- The books are in the care of ▶ **110 HILLSIDE BOULEVARD, SUITE 14 - LAKEWOOD, NJ 08701**
 Telephone No. ▶ **(732) 901-8561** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2009**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

- ▶ calendar year **2008** or
 ▶ tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization Boys Town Jerusalem Foundation of America, Inc.	Employer identification number 11 : 5324002
	Number, street, and room or suite no. If a P.O. box, see instructions. 1 Penn Plaza, No. 6250	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions New York, New York 10001	

Check type of return to be filed (File a separate application for each return):

- | | | | |
|--|---|--------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **Miriam Salzer**
 Telephone No. **(732) 901-8561** FAX No **()**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **November 15**, 20**09**.
- For calendar year **2008**, or other tax year beginning _____, 20____, and ending _____, 20____.
- If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- State in detail why you need the extension **Certain information necessary to file a complete and accurate return is not yet available. It is anticipated that all data will be available prior to the extended due date.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$	N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title **CPA** Date **07/31/09**