

# 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)

**2005**

**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 2005 calendar year, or tax year beginning **1/1/2005**, 2005, and ending **12/31/2005**, 20

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>KULANU INC</b> Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>11603 Gilsan Street</b> City or town, state or country, and ZIP + 4 <b>Silver Spring, MD 20902-3122</b>	<b>D</b> Employer identification number <b>52 : 1919094</b>
		<b>E</b> Telephone number <b>( 212 ) 877-8082</b>
<input type="checkbox"/> Please use IRS label or print or type. See Specific Instructions.		<b>F</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

**H** and **I** are not applicable to section 527 organizations.  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates ▶

**G** Website: ▶ [www.kulanu.org](http://www.kulanu.org)  
**J** Organization type (check only one) ▶  501(c) ( 3 ) ◀ (insert no.)  4947(a)(1) or  527  
**H(c)** Are all affiliates included?  Yes  No (If "No," attach a list. See instructions.)

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **168,825**  
**I** Group Exemption Number ▶  
**M** Check  if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

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

		(A) Securities	(B) Other		
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Direct public support	<b>1a</b>	<b>129,508</b>		
	<b>b</b> Indirect public support	<b>1b</b>	<b>0</b>		
	<b>c</b> Government contributions (grants)	<b>1c</b>	<b>0</b>		
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>129,508</b> noncash \$ <b>0</b> )				<b>1d</b> <b>129,508</b>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)				<b>2</b> <b>4,949</b>
	<b>3</b> Membership dues and assessments				<b>3</b> <b>0</b>
	<b>4</b> Interest on savings and temporary cash investments				<b>4</b> <b>24</b>
	<b>5</b> Dividends and interest from securities				<b>5</b> <b>0</b>
	<b>6a</b> Gross rents	<b>6a</b>	<b>0</b>		
	<b>b</b> Less: rental expenses	<b>6b</b>	<b>0</b>		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)				<b>6c</b> <b>0</b>
<b>7</b> Other investment income (describe ▶)				<b>7</b> <b>0</b>	
<b>8a</b> Gross amount from sales of assets other than inventory		<b>0</b>	<b>0</b>		
	<b>b</b> Less: cost or other basis and sales expenses	<b>0</b>	<b>0</b>		
	<b>c</b> Gain or (loss) (attach schedule)	<b>0</b>	<b>0</b>		
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))				<b>8d</b> <b>0</b>
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	<b>a</b> Gross revenue (not including \$ <b>0</b> of contributions reported on line 1a)	<b>9a</b>	<b>0</b>		
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>	<b>0</b>		
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)				<b>9c</b> <b>0</b>
<b>10a</b> Gross sales of inventory, less returns and allowances <b>Stmt 1</b>		<b>10a</b>	<b>34,344</b>		
	<b>b</b> Less: cost of goods sold	<b>10b</b>	<b>31,608</b>		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)				<b>10c</b> <b>2,736</b>
<b>11</b> Other revenue (from Part VII, line 103)				<b>11</b> <b>0</b>	
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				<b>12</b> <b>137,217</b>	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))			<b>13</b>	<b>105,966</b>
	<b>14</b> Management and general (from line 44, column (C))			<b>14</b>	<b>4,408</b>
	<b>15</b> Fundraising (from line 44, column (D))			<b>15</b>	<b>15,800</b>
	<b>16</b> Payments to affiliates (attach schedule)			<b>16</b>	<b>0</b>
	<b>17</b> Total expenses (add lines 16 and 44, column (A))			<b>17</b>	<b>126,174</b>
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)			<b>18</b>	<b>11,043</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))			<b>19</b>	<b>57,028</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>Stmt 2</b>			<b>20</b>	<b>25</b>
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)			<b>21</b>	<b>68,096</b>

**Part II 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.)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
<b>22</b>	Grants and allocations (attach schedule) <b>Stmt 3</b> (cash \$ <u>97,525</u> noncash \$ <u>0</u> ) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	<b>22</b>	<b>97,525</b>	<b>97,525</b>		
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>	<b>0</b>	<b>0</b>		
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>	<b>0</b>	<b>0</b>		
<b>25</b>	Compensation of officers, directors, etc.	<b>25</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>26</b>	Other salaries and wages	<b>26</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>27</b>	Pension plan contributions	<b>27</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>28</b>	Other employee benefits	<b>28</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>29</b>	Payroll taxes	<b>29</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>30</b>	Professional fundraising fees	<b>30</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>31</b>	Accounting fees	<b>31</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>32</b>	Legal fees	<b>32</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>33</b>	Supplies	<b>33</b>	<b>303</b>	<b>303</b>	<b>0</b>	<b>0</b>
<b>34</b>	Telephone	<b>34</b>	<b>590</b>	<b>482</b>	<b>108</b>	<b>0</b>
<b>35</b>	Postage and shipping	<b>35</b>	<b>5,430</b>	<b>2,146</b>	<b>0</b>	<b>3,284</b>
<b>36</b>	Occupancy	<b>36</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>37</b>	Equipment rental and maintenance	<b>37</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>38</b>	Printing and publications	<b>38</b>	<b>8,014</b>	<b>0</b>	<b>0</b>	<b>8,014</b>
<b>39</b>	Travel	<b>39</b>	<b>5,510</b>	<b>5,510</b>	<b>0</b>	<b>0</b>
<b>40</b>	Conferences, conventions, and meetings	<b>40</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>41</b>	Interest	<b>41</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>42</b>	Depreciation, depletion, etc. (attach schedule)	<b>42</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>43</b>	Other expenses not covered above (itemize):					
a	<b>See Statement 4</b>	<b>43a</b>	<b>8,802</b>		<b>4,300</b>	<b>4,502</b>
b		<b>43b</b>				
c		<b>43c</b>				
d		<b>43d</b>				
e		<b>43e</b>				
f		<b>43f</b>				
g		<b>43g</b>				
<b>44</b>	<b>Total functional expenses.</b> Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	<b>126,174</b>	<b>105,966</b>	<b>4,408</b>	<b>15,800</b>

**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.

<p>What is the organization's primary exempt purpose? ► <u>Help lost &amp; dispersed Jewish communities</u></p> <p>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.)</p>	<p><b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)</p>
<p><b>a</b> <u>See Statement 5</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>b</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>c</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>d</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>e</b> Other program services (attach schedule)</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services). . . . ►</p>	<p><b>105,966</b></p>

**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)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>45</b> Cash—non-interest-bearing . . . . .	<b>50,989</b>	<b>45</b>	<b>62,033</b>
	<b>46</b> Savings and temporary cash investments . . . . .	<b>6,039</b>	<b>46</b>	<b>6,063</b>
	<b>47a</b> Accounts receivable . . . . .	<b>0</b>		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>0</b>	<b>47c</b>	<b>0</b>
	<b>48a</b> Pledges receivable . . . . .	<b>0</b>		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>0</b>	<b>48c</b>	<b>0</b>
	<b>49</b> Grants receivable . . . . .	<b>0</b>	<b>49</b>	<b>0</b>
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .	<b>0</b>	<b>50</b>	<b>0</b>
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>0</b>		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>0</b>	<b>51c</b>	<b>0</b>
	<b>52</b> Inventories for sale or use . . . . .	<b>0</b>	<b>52</b>	<b>0</b>
	<b>53</b> Prepaid expenses and deferred charges . . . . .	<b>0</b>	<b>53</b>	<b>0</b>
	<b>54</b> Investments—securities (attach schedule) . . . . .	<b>0</b>	<b>54</b>	<b>0</b>
		▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		
	<b>55a</b> Investments—land, buildings, and equipment: basis . . . . .	<b>0</b>		
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>0</b>	<b>55c</b>	<b>0</b>	
<b>56</b> Investments—other (attach schedule) . . . . .	<b>0</b>	<b>56</b>	<b>0</b>	
<b>57a</b> Land, buildings, and equipment: basis . . . . .	<b>0</b>			
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>0</b>	<b>57c</b>	<b>0</b>	
<b>58</b> Other assets (describe ▶ <a href="#">See Statement 6</a> . . . . .)	<b>0</b>	<b>58</b>	<b>0</b>	
<b>59 Total assets</b> (must equal line 74). Add lines 45 through 58. . . . .	<b>57,028</b>	<b>59</b>	<b>68,096</b>	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses . . . . .	<b>0</b>	<b>60</b>	<b>0</b>
	<b>61</b> Grants payable . . . . .	<b>0</b>	<b>61</b>	<b>0</b>
	<b>62</b> Deferred revenue . . . . .	<b>0</b>	<b>62</b>	<b>0</b>
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .	<b>0</b>	<b>63</b>	<b>0</b>
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .	<b>0</b>	<b>64a</b>	<b>0</b>
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .	<b>0</b>	<b>64b</b>	<b>0</b>
	<b>65</b> Other liabilities (describe ▶ . . . . .)	<b>0</b>	<b>65</b>	<b>0</b>
<b>66 Total liabilities.</b> Add lines 60 through 65 . . . . .	<b>0</b>	<b>66</b>	<b>0</b>	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	<b>67</b> Unrestricted . . . . .		<b>67</b>	
	<b>68</b> Temporarily restricted . . . . .		<b>68</b>	
	<b>69</b> Permanently restricted . . . . .		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	<b>70</b> Capital stock, trust principal, or current funds. . . . .	<b>0</b>	<b>70</b>	<b>0</b>
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .	<b>0</b>	<b>71</b>	<b>0</b>
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .	<b>57,028</b>	<b>72</b>	<b>68,096</b>
<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) <b>must</b> equal line 19; column (B) <b>must</b> equal line 21) . . . . .	<b>57,028</b>	<b>73</b>	<b>68,096</b>	
<b>74 Total liabilities and net assets/fund balances.</b> Add lines 66 and 73.	<b>57,028</b>	<b>74</b>	<b>68,096</b>	





<b>Part VI Other Information</b> <i>(continued)</i>		Yes	No
<b>82a</b>	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?		✓
	<b>b</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	✓	
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?		
	<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	✓	
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
	<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		
<b>85</b>	<b>501(c)(4), (5), or (6) organizations. a</b> Were substantially all dues nondeductible by members?		
	<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	<b>c</b> Dues, assessments, and similar amounts from members	85c	
	<b>d</b> Section 162(e) lobbying and political expenditures	85d	
	<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
	<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
	<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
	<b>h</b> 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	
<b>86</b>	<b>501(c)(7) orgs.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12	86a	
	<b>b</b> Gross receipts, included on line 12, for public use of club facilities	86b	
<b>87</b>	<b>501(c)(12) orgs.</b> Enter: <b>a</b> Gross income from members or shareholders	87a	
	<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
<b>88</b>	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	88	✓
<b>89a</b>	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
	<b>b</b> <b>501(c)(3) and 501(c)(4) orgs.</b> 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	✓
	<b>c</b> Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		0
	<b>d</b> Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0		0
<b>90a</b>	List the states with which a copy of this return is filed ▶ <u>None</u>		
	<b>b</b> Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	0
<b>91a</b>	The books are in care of ▶ <u>Harriet Bograd</u> Telephone no. ▶ <u>212-877-8082</u> Located at ▶ <u>165 West End Ave 3R, New York, NY</u> ZIP + 4 ▶ <u>10023</u>		
	<b>b</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	✓
	If "Yes," enter the name of the foreign country ▶		
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts.	91c	✓
	<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶		
<b>92</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92	<input type="checkbox"/>

**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	
<b>93</b> Program service revenue:					
<b>a</b> <b>Volunteer speakers fees paid to Kulanu</b>					<b>4,940</b>
<b>b</b> <b>Royalties from book</b>					<b>9</b>
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments					<b>24</b>
<b>96</b> Dividends and interest from securities . . . . .					
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property . . . . .					
<b>b</b> not debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory					<b>\$2,736</b>
<b>103</b> Other revenue: <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .		<b>0</b>		<b>0</b>	<b>\$7,709</b>
<b>105</b> <b>Total</b> (add line 104, columns (B), (D), and (E)) . . . . .					<b>7,709</b>

**Note:** Line 105 plus line 1d, 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).
	<b>See Statement 8</b>

**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).

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.

**Please Sign Here**

Signature of officer: **Harriet Bograd, Treasurer** Date: \_\_\_\_\_

Type or print name and title.

**Paid Preparer's Use Only**

Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: \_\_\_\_\_ Preparer's SSN or PTIN (See Gen. Inst. W): \_\_\_\_\_

EIN: \_\_\_\_\_ Phone no.: \_\_\_\_\_



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

**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

**2005**

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

**KULANU INC**

Employer identification number

**52 : 1919094**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 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
None				
Total number of other employees paid over \$50,000 . ▶		<b>0</b>		

**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
None		
Total number of others receiving over \$50,000 for professional services . . . . . ▶		<b>0</b>

**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 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services . . . . . ▶		<b>0</b>

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

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including 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 i of Part VI-B.) . . . . .		✓
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.		
<b>2</b> 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.)		
<b>a</b> Sale, exchange, or leasing of property? . . . . .	<b>2a</b>	✓
<b>b</b> Lending of money or other extension of credit? . . . . .	<b>2b</b>	✓
<b>c</b> Furnishing of goods, services, or facilities? . . . . .	<b>2c</b>	✓
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .	<b>2d</b>	✓
<b>e</b> Transfer of any part of its income or assets? . . . . .	<b>2e</b>	✓
<b>3a</b> Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) . . . . .	<b>3a</b>	✓
<b>b</b> Do you have a section 403(b) annuity plan for your employees? . . . . .	<b>3b</b>	✓
<b>c</b> During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	<b>3c</b>	✓
<b>4a</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? . . . . .	<b>4a</b>	✓
<b>b</b> Do you provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .	<b>4b</b>	✓

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)

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 supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization:  Type 1  Type 2  Type 3  
Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14**  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)



**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
<b>29</b>	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? . . . . .		
<b>30</b>	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? . . . . .		
<b>31</b>	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.) ..... ..... .....		
<b>32</b>	Does the organization maintain the following:		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .		
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .		
<b>d</b>	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.) ..... .....		
<b>33</b>	Does the organization discriminate by race in any way with respect to:		
<b>a</b>	Students' rights or privileges? . . . . .		
<b>b</b>	Admissions policies? . . . . .		
<b>c</b>	Employment of faculty or administrative staff? . . . . .		
<b>d</b>	Scholarships or other financial assistance? . . . . .		
<b>e</b>	Educational policies? . . . . .		
<b>f</b>	Use of facilities? . . . . .		
<b>g</b>	Athletic programs? . . . . .		
<b>h</b>	Other extracurricular activities? . . . . .		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ..... .....		
<b>34a</b>	Does the organization receive any financial aid or assistance from a governmental agency? . . . . .		
<b>b</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.		
<b>35</b>	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 9 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.

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures . . . . .	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount. Enter the amount from the following table—		
	<b>If the amount on line 40 is—</b> <b>The lobbying nontaxable amount is—</b>		
	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	<b>41</b>	
	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 . . . . .		
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41). . . . .	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36. . . . .	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38. . . . .	<b>44</b>	

**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 11 of the instructions.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures . . . . .					
<b>48</b> Grassroots nontaxable amount . . . . .					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> 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 11 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
<b>a</b> Volunteers . . . . .		✓	
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> ). . . . .		✓	
<b>c</b> Media advertisements. . . . .		✓	
<b>d</b> Mailings to members, legislators, or the public . . . . .		✓	
<b>e</b> Publications, or published or broadcast statements . . . . .		✓	
<b>f</b> Grants to other organizations for lobbying purposes . . . . .		✓	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body. . . . .		✓	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .		✓	
<b>i</b> Total lobbying expenditures (Add lines <b>c</b> through <b>h</b> ). . . . .			<b>0</b>

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



**Statement 1**

Form: 990

Page: 1

Part: I

Question: 10

**KULANU INC****52-1919094****Sales of Inventory**

<b>Description</b>	<b>Gross Sales</b>	<b>COGS</b>	<b>Gross Profit</b>
Books	\$3,103.00	\$805.00	\$2,298.00
Jewish crafts & music	\$31,241.00	\$30,803.00	\$438.00
<b>Total:</b>	<b>\$34,344.00</b>	<b>\$31,608.00</b>	<b>\$2,736.00</b>

**Statement 2**

Form: 990

Page: 1

Part: I

Question: 20

**KULANU INC**

**52-1919094**

**Other changes in Net Assets or Fund Balances**

<b>Explanation</b>	<b>Amount</b>
Expiration of gift certificate	\$25.00
<b>Total:</b>	<b>\$25.00</b>



**Statement 3**

Form: 990

Page: 2

Part: II

Question: 22

**KULANU INC****52-1919094****Grants and Allocations**

<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Abayudaya Congregation
<b>Number of individuals:</b>		PO Box 225
<b>Grant Amount</b>	\$1,400.00	Mbale, . .
<b>Classification</b>	Microcredit Loan Program	Uganda
<b>Relationship:</b>	None	
<b>Description of Property:</b>		
<b>How Determined</b>		
<b>Book Value of Property:</b>		
<b>FMV of Property:</b>		
<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Sadok Yacobi
<b>Number of individuals:</b>		Kuthareddipaleim PO Chebrol 522
<b>Grant Amount</b>	\$500.00	Guntor DT, Andra .
<b>Classification</b>	Synagogue Roof	India
<b>Relationship:</b>	None	
<b>Description of Property:</b>		
<b>How Determined</b>		
<b>Book Value of Property:</b>		
<b>FMV of Property:</b>		
<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Abayudaya Congregation
<b>Number of individuals:</b>		PO Box 225
<b>Grant Amount</b>	\$24,049.00	Mbale, . .
<b>Classification</b>	Elem & High School Construction	Uganda
<b>Relationship:</b>	None	
<b>Description of Property:</b>		
<b>How Determined</b>		
<b>Book Value of Property:</b>		
<b>FMV of Property:</b>		
<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Laura Pisoni
<b>Number of individuals:</b>		4761 Broadway Apt 2X-6
<b>Grant Amount</b>	\$250.00	New York, NY 10034
<b>Classification</b>	Volunteer in Uganda	United States
<b>Relationship:</b>	None	
<b>Description of Property:</b>		
<b>How Determined</b>		
<b>Book Value of Property:</b>		
<b>FMV of Property:</b>		
<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Elizabeth France
<b>Number of individuals:</b>		6553 E Costilla Pl

**Grant Amount** \$250.00 Centennial, CO 80112  
**Classification** Volunteer in Uganda United States  
**Relationship:** None  
**Description of Property:**

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:** **Name and Address:**  
**Type:** Cash Chaya Weinstein  
**Number of individuals:** 165 Seaman Avenue 3J  
**Grant Amount** \$500.00 New York, NY 10034  
**Classification** Volunteer in Uganda United States  
**Relationship:** None  
**Description of Property:**

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:** **Name and Address:**  
**Type:** Cash Remy Ilona  
**Number of individuals:** PO Box 11505 Area 0  
**Grant Amount** \$5,500.00 Garki, Abuja .  
**Classification** Igbo/Jewish Outreach and Nigeria  
**Relationship:** None  
**Description of Property:**

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:** **Name and Address:**  
**Type:** Cash David Wise  
**Number of individuals:** 85-24 Abingdon Road  
**Grant Amount** \$250.00 Jamaica, NY 11415  
**Classification** Math Teacher Volunteer in Uganda United States  
**Relationship:** None  
**Description of Property:**

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:** **Name and Address:**  
**Type:** Cash Sarah Horowitz  
**Number of individuals:** 3525 Anza Street  
**Grant Amount** \$250.00 San Francisco, CA 94121  
**Classification** Individual United States  
**Relationship:** None  
**Description of Property:**

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:** **Name and Address:**  
**Type:** Cash Bina Cultural Foundation

**Number of individuals:**  
**Grant Amount** \$350.00  
**Classification** Ethiopian Film Festival  
**Relationship:** None  
**Description of Property:**

PO Box 470  
New York, NY 10031  
United States

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Havila Institute
<b>Number of individuals:</b>		Grand Place
<b>Grant Amount</b>	\$6,000.00	LouvainlaNeuve, . .
<b>Classification</b>	Passover Seder for Tutsi exiles,	Belgium
<b>Relationship:</b>	nONE	
<b>Description of Property:</b>		

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Havila Institute
<b>Number of individuals:</b>		Grand Place
<b>Grant Amount</b>	\$5,000.00	LouvainlaNeuve, . .
<b>Classification</b>	Human Rights Work with Tutsis	Belgium
<b>Relationship:</b>	None	
<b>Description of Property:</b>		

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Molly Sonenklar
<b>Number of individuals:</b>		12700 Sawdust Drive
<b>Grant Amount</b>	\$250.00	Glenn Allen, VA 23059
<b>Classification</b>	Volunteer in Uganda	United States
<b>Relationship:</b>	None	
<b>Description of Property:</b>		

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

<b>Date:</b>		<b>Name and Address:</b>
<b>Type:</b>	Cash	Abayudaya Congregation
<b>Number of individuals:</b>		PO Box 225
<b>Grant Amount</b>	\$8,071.00	Mbale, . .
<b>Classification</b>	Water and Electricity Projects	Uganda
<b>Relationship:</b>	None	
<b>Description of Property:</b>		

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

<b>Date:</b>		<b>Name and Address:</b>
--------------	--	--------------------------

**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$6,000.00  
**Classification** Outreach to Bnei Menashe in India  
**Relationship:** None  
**Description of Property:**

Amishav USA  
1121 12th St NW  
Washington, DC 20005  
United States

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$3,017.00  
**Classification** women's study , conf's, &  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Abayudaya Congregation  
PO Box 225  
Mbale, . .  
Uganda

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$500.00  
**Classification** African Chanukah Party  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
JCC of Manhattan  
334 Amsterdam Ave  
New York, NY 10023  
United States

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$150.00  
**Classification** Music Fund  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Abayudaya Congregation  
PO Box 225  
Mbale, . .  
Uganda

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$589.00  
**Classification** Travel to Jewish community,  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Rabbi Peter Tarlow  
800 George Bush Drive  
College Station, TX 77840  
United States

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:** **Name and Address:**

**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$250.00  
**Classification** Summer Volunteer, Uganda  
**Relationship:** None  
**Description of Property:**

Aaron Zilbermann  
2612 Guadalupe St 104  
Austin, TX 78705  
United States

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$8,466.00  
**Classification** Health Fund - prevention,  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Abayudaya Congregation  
PO Box 225  
Mbale, . .  
Uganda

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$1,700.00  
**Classification** Book Publication, "Igbo, Jews in  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Remy Ilona  
PO Box 11505 Area 0  
Garki, Abuja .  
Nigeria

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

---

**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$500.00  
**Classification** Volunteer in Uganda  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Holly Moskowitz  
9502 Branway Court  
Richmond, VA 23229  
United States

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

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**Date:**  
**Type:** Cash  
**Number of individuals:**  
**Grant Amount** \$23,483.00  
**Classification** Elem. & High School Operations  
**Relationship:** None  
**Description of Property:**

**Name and Address:**  
Abayudaya Congregation  
PO Box 225  
Mbale, . .  
Uganda

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

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**Date:**

**Name and Address:**

<b>Type:</b>	Cash	Sarah Gold
<b>Number of individuals:</b>		6400 Patterson Avenue
<b>Grant Amount</b>	\$250.00	Richmond, VA 23226
<b>Classification</b>	Volunteer in Uganda	United States
<b>Relationship:</b>	None	
<b>Description of Property:</b>		

**How Determined**

**Book Value of Property:**  
**FMV of Property:**

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**Total Grants:** **\$97,525.00**

**Statement 4**

Form: 990

Page: 2

Part: II

Question: 43

**KULANU INC****52-1919094****Attachment listing other expenses for Part II**

<b>Description</b>	<b>Total:</b>	<b>Pgm Services</b>	<b>Mgt and General</b>	<b>Fundraising</b>
Bank & Credit Card Charges	\$1,199.00	\$0.00	\$1,199.00	\$0.00
Sales Taxes	\$245.00	\$0.00	\$0.00	\$245.00
Temporary Help	\$2,965.00	\$0.00	\$0.00	\$2,965.00
Insurance	\$1,725.00	\$0.00	\$1,725.00	\$0.00
Online Database Services	\$1,292.00	\$0.00	\$0.00	\$1,292.00
Boutique sales expenses from prior	\$1,376.00	\$0.00	\$1,376.00	\$0.00
<b>Total:</b>	<b>\$8,802.00</b>	<b>\$0.00</b>	<b>\$4,300.00</b>	<b>\$4,502.00</b>

**Statement 5**

Form: 990

Page: 3

Part: III

Question:

**KULANU INC****52-1919094****Program Services**

<b>Achievement</b>	<b>Pgm. Svc. Exp.</b>
<p>Religion Related, Spiritual Development: Abayudaya Jewish Community, Uganda. Supported elementary &amp; secondary schools, classroom &amp; dorm construction, womens association, health fund, vocational education, nutrition programs, microcredit program, water and electricity projects, sent volunteers. Schools &amp; economic development program serve Christians, Muslims and Jews. Facilitated the development of Mirembe Kawomera Coffee coop, a fair-trade, organic coffee coop of Jews, Christians and Muslims working together. (700 Abayudaya Community Members)</p> <p><b>Grants and Allocations:</b> \$70,886.00</p>	\$73,832.00
<p>Religion Related, Spiritual Development: Kulanu Boutique: Paid \$23,683 to Abayudaya Jewish community in Uganda and \$7,469 to Sefwi Wiawso Jewish community in Ghana from sales of their religious crafts &amp; CDs. Sales publicize these communities. Reported in financial reports as cost of goods sold. See Kulanuboutique.com. (0.00 products sold)</p> <p><b>Grants and Allocations:</b> \$0.00</p>	\$0.00
<p>Religion Related, Spiritual Development: Education and Networking: Published a 16-page quarterly newsletter and distributed 1500-1800 copies of each. Distributed our book, Under One Canopy, about Jewish diversity. Maintain email discussion group (kulanu-listyahoogroups.com) and Web site (kulanu.org). Sponsored or encouraged many lectures and speaking tours. (Note: \$8772 spent on newsletter is shown as fundraising in Form 990. But it is a major educational accomplishment.) (6400 newsletters)</p> <p><b>Grants and Allocations:</b> \$500.00</p>	\$500.00
<p>Religion Related, Spiritual Development: Other Communities: Worked on Judaism and Jewish heritage with communities in Burundi (and Tutsi exiles in Belgium), Ghana, India, Myanmar, Mexico, Nigeria, Portugal, South Africa, US, and Zimbabwe). (10 Countries)</p> <p><b>Grants and Allocations:</b> \$26,139.00</p>	\$31,634.00
<b>Total:</b>	<b>\$105,966.00</b>



**Statement 6**

Form: 990

Page: 4

Part: IV

Question: 58

**KULANU INC**

**52-1919094**

**Other Assets**

<b>Asset Description</b>	<b>BOY Amount</b>	<b>EOY Amount</b>
Cash (from Form 990EZ, efile prog won't move it)	\$0.00	
<b>Total:</b>	<b>\$0.00</b>	

**Statement 7**

Form: 990

Page: 5

Part: V

Question:

**KULANU INC****52-1919094****Officers, Directors, Trustees, and Key Employees**

<b>Name and Address</b>	<b>Title</b>	<b>Hrs</b>	<b>Comp.</b>	<b>Benefits</b>	<b>Expenses</b>
Aron Primack 1217 Edgevale Road Silver Spring, MD 20910 United States	Vice President	10	\$0.00	\$0.00	\$0.00
Harriet Bograd 165 West End Ave 3R New York, NY 10023 United States	Treasurer	35	\$0.00	\$0.00	\$0.00
Jack Zeller 11603 Gilsan Street Silver Spring, MD 20902-3122 United States	President	35	\$0.00	\$0.00	\$0.00
Karen Primack 1217 Edgevale Road Silver Spring, MD 20910 United States	Secretary	35	\$0.00	\$0.00	\$0.00
Moshe Cotel 639 West End Ave New York, NY 10025-7343 United States	Board Member	3	\$0.00	\$0.00	\$0.00
<b>TOTALS</b>			<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Statement 8**

Form: 990

Page: 8

Part: VIII

Question:

**KULANU INC**

**52-1919094**

**Relationship of Activities**

<b>Line No</b>	<b>Relationship of Activities to the Accomplishment of Exempt Purposes</b>
102	Kulanu sells books written by Kulanu authors, music CDs and Jewish ritual crafts made by communities that we work with. These objects help educate buyers about the vibrant Jewish communities in Africa and Asia. Most of the proceeds of these sales are sent to the producers of these crafts, which also helps these low-income communities with economic development.
93 a	Speakers fees were paid by synagogues and schools and other organizations for educational presentations related to the programs of Kulanu.
93 b	Royalties were received for sales of the Kulanu book, Jews in Places You Never Thought Of. This book teaches people about the mission of Kulanu.
95	Bank Interest.