**PUBLIC INSPECTION COPY**

**Return of Organization Exempt From Income Tax**

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)**

- Do not enter Social Security numbers on this form as it may be made public.
- Information about Form 990 and its instructions is at www.irs.gov/form990.

**A For the 2018 calendar year, or tax year beginning , 2018, and ending , 20**

<table>
<thead>
<tr>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check if applicable:</td>
<td>Name of organization</td>
<td>Employer Identification number</td>
<td>Telephone number</td>
<td>City or town, state or province, country, and ZIP or foreign postal code</td>
<td>Gross receipts</td>
</tr>
<tr>
<td>Address change</td>
<td>JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES</td>
<td>95-6111928</td>
<td>(323) 761-8700</td>
<td>LOS ANGELES, CA 90048</td>
<td>590,015,137.</td>
</tr>
<tr>
<td>Initial return</td>
<td>6505 WILSHIRE BLVD, SUITE 1200</td>
<td>Room/suite: 501(c)(3)</td>
<td></td>
<td>MARVIN I. SCHOTLAND</td>
<td></td>
</tr>
<tr>
<td>Terminated return</td>
<td>Insert no.</td>
<td>501(c) ( )</td>
<td>City or town, state or province, country, and ZIP or foreign postal code</td>
<td>6505 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
<td></td>
</tr>
<tr>
<td>Amended return</td>
<td>Application pending</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>J</td>
<td>K</td>
<td>L</td>
<td>M</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Web site:</td>
<td>Form of organization:</td>
<td>Year of formation:</td>
<td>State of legal domicile:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Corporation</td>
<td>1964</td>
<td>CA</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part I Summary**

1. Briefly describe the organization’s mission or most significant activities.
   - THE FOUNDATION IS THE LARGEST MANAGER OF CHARITABLE ASSETS AND LEADER IN PLANNED GIVING SOLUTIONS FOR GREATER LOS ANGELES JEWISH PHILANTHROPISTS THROUGH ITS VARIOUS PROGRAMS.

2. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.
   - Yes
   - No

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

4. Number of independent voting members of the governing body (Part VI, line 1b).
   - 31.

5. Total number of individuals employed in calendar year 2018 (Part V, line 2a).
   - 5

6. Total number of volunteers (estimate if necessary).
   - 100.

7. Total unrelated business revenue from Part VIII, column (C), line 12.
   - 171,353.

8. Net unrelated business taxable income from Form 990-T, line 34.
   - 151,469.

**Revenue**

- Contributions and grants (Part VIII, line 1h)
- Program service revenue (Part VIII, line 2d)
- Investment income (Part VIII, column (A), lines 3, 4, and 7d)
- Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, 11c)
- Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

**Expenses**

- Grants and similar amounts paid (Part IX, column (A), lines 1-3)
- Benefits paid to or for members (Part IX, column (A), line 4).
- Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).
- Professional fundraising fees (Part IX, column (A), line 11)
- Total fundraising expenses (Part IX, column (D), line 25)
- Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)
- Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)
- Revenue less expenses. Subtract line 18 from line 12.

**Net Assets or Fund Balances**

- Total assets (Part X, line 16).
- Total liabilities (Part X, line 26).
- Net assets or fund balances. Subtract line 21 from line 20.

**Sign Here**

Signature of officer: [Signature]

Type or print name and title: David Carroll, CPA

Date: 11/12/19

**Paid Preparer Use Only**

Preparer's name: Jocelyn C. Miller

Preparer's signature: [Signature]

Date: 11/08/19

Check if self-employed: [ ]

PTIN: 00634378

Firm's name: ERNST & YOUNG U.S. LLP

Firm's EIN: 34-6565596

Firm's address: 4365 EXECUTIVE DR., STE 1600 SAN DIEGO, CA 92121

Phone no.: 858-535-7200

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

Signature of preparer: [Signature]

[ ] Yes

[ ] No

For Paperwork Reduction Act Notice, see the separate instructions.
Part III  Statement of Program Service Accomplishments

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 organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 $95,289,932. including grants of $95,289,932.) (Revenue $111,000.)  
SEE SCHEDULE O

4b (Code: _________) (Expenses $_________ including grants of $_________) (Revenue $_________)

4c (Code: _________) (Expenses $_________ including grants of $_________) (Revenue $_________)

4d Other program services (Describe in Schedule O.)  
(Expenses $_________ including grants of $_________) (Revenue $_________)

4e Total program service expenses ► 95,289,932.
**Part IV Checklist of Required Schedules**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
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<tbody>
<tr>
<td>1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If “Yes,” complete Schedule A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?</td>
<td></td>
<td></td>
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<td>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office?</td>
<td></td>
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<td>4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?</td>
<td></td>
<td></td>
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<tr>
<td>5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?</td>
<td></td>
<td></td>
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<tr>
<td>7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Did the organization maintain collections of works of art, historical treasures, or other similar assets?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 If the organization's answer to any of the following questions is “Yes,” then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
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<tr>
<td>a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10?</td>
<td></td>
<td></td>
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<tr>
<td>b) Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16?</td>
<td></td>
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<tr>
<td>d) Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16?</td>
<td></td>
<td></td>
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<tr>
<td>e) Did the organization report an amount for other liabilities in Part X, line 25?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a Did the organization obtain separate, independent audited financial statements for the tax year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Was the organization included in consolidated, independent audited financial statements for the tax year? If “Yes,” and if the organization answered “No” to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If “Yes,” complete Schedule E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If “Yes,” complete Schedule G, Part I (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If “Yes,” complete Schedule G, Part II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If “Yes,” complete Schedule G, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20a Did the organization operate one or more hospital facilities? If “Yes,” complete Schedule H</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) If “Yes” to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If “Yes,” complete Schedule I, Parts I and II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----</td>
<td>----</td>
</tr>
<tr>
<td>Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If &quot;Yes,&quot; complete Schedule I, Parts I and III.</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>Did the organization answer &quot;Yes&quot; to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J.</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>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? If &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a.</td>
<td></td>
<td>24a</td>
</tr>
<tr>
<td>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td>24b</td>
</tr>
<tr>
<td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td>24c</td>
</tr>
<tr>
<td>Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td>24d</td>
</tr>
<tr>
<td>Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td>29</td>
</tr>
<tr>
<td>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td></td>
<td>28a</td>
</tr>
<tr>
<td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td></td>
<td>27</td>
</tr>
<tr>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td></td>
<td>25a</td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td>26</td>
</tr>
<tr>
<td>If &quot;Yes&quot; to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?</td>
<td></td>
<td>27</td>
</tr>
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<td>Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
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<td>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td></td>
<td>28b</td>
</tr>
<tr>
<td>Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If &quot;Yes,&quot; complete Schedule L, Part III.</td>
<td></td>
<td>28c</td>
</tr>
<tr>
<td>Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):</td>
<td></td>
<td>29</td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>30</td>
</tr>
<tr>
<td>b A family member of a current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>31</td>
</tr>
<tr>
<td>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>32</td>
</tr>
<tr>
<td>Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>33</td>
</tr>
<tr>
<td>Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>34</td>
</tr>
<tr>
<td>Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I.</td>
<td></td>
<td>35</td>
</tr>
<tr>
<td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II.</td>
<td></td>
<td>36</td>
</tr>
<tr>
<td>Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If &quot;Yes,&quot; complete Schedule R, Part I.</td>
<td></td>
<td>37</td>
</tr>
<tr>
<td>Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1.</td>
<td></td>
<td>38</td>
</tr>
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<td>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
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<td>b If &quot;Yes&quot; to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td></td>
<td>40</td>
</tr>
<tr>
<td>Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td></td>
<td>41</td>
</tr>
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<td>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? If &quot;Yes,&quot; complete Schedule R, Part VI.</td>
<td></td>
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<td></td>
<td>24a</td>
</tr>
<tr>
<td>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td>24b</td>
</tr>
<tr>
<td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td>24c</td>
</tr>
<tr>
<td>Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td></td>
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<td>27</td>
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<tr>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td></td>
<td>25a</td>
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<td></td>
<td>28a</td>
</tr>
<tr>
<td>Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):</td>
<td></td>
<td>28b</td>
</tr>
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</tr>
<tr>
<td>Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td>29</td>
</tr>
<tr>
<td>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td></td>
<td>28a</td>
</tr>
<tr>
<td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td></td>
<td>27</td>
</tr>
<tr>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td></td>
<td>25a</td>
</tr>
</tbody>
</table>

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td></td>
<td>1a</td>
</tr>
<tr>
<td>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td></td>
<td>1b</td>
</tr>
<tr>
<td>Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td>1c</td>
</tr>
</tbody>
</table>
Part V  Statements Regarding Other IRS Filings and Tax Compliance (continued)

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.  2a

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  2b

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  3a

3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.  3b

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)?  4a

4b If "Yes," enter the name of the foreign country: CAYMAN ISLANDS


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b

5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  5c

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6a

6b  

7 Organizations that may receive deductible contributions under section 170(c).

7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?  7a

7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7c

7d If "Yes," indicate the number of Forms 8282 filed during the year.  7d

7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7f

7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7g

7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7h

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8

9 Sponsoring organizations maintaining donor advised funds.

9a Did the sponsoring organization make any taxable distributions under section 4966?  9a

9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b

10 Section 501(c)(7) organizations. Enter:

10a Initiation fees and capital contributions included on Part VIII, line 12.  10a

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  10b

11 Section 501(c)(12) organizations. Enter:

11a Gross income from members or shareholders.  11a

11b 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?  12a

12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  12b

13 Section 501(c)(29) qualified nonprofit health insurance issuers.

13a Is the organization licensed to issue qualified health plans in more than one state?  13a

Note. See the instructions for additional information the organization must report on Schedule O.

13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  13b

13c Enter the amount of reserves on hand.  13c

14a Did the organization receive any payments for indoor tanning services during the tax year?  14a

14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  15

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Form 990 (2018)
**Section A. Governing Body and Management**

1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>31</td>
<td></td>
</tr>
</tbody>
</table>

1b Enter the number of voting members included in line 1a, above, who are independent.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b</td>
<td>31</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

6 Did the organization have members or stockholders?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

8a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

8b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>8b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

9 Is there any officer, director, 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.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Section B. Policies**

*This Section B requests information about policies not required by the Internal Revenue Code.*

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

10b Did the organization have local chapters, branches, or affiliates?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

12a Did the organization have a written conflict of interest policy? If “No,” go to line 13

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe in Schedule O how this was done

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12c</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

13 Did the organization have a written whistleblower policy?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

14 Did the organization have a written document retention and destruction policy?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

15b The organization's CEO, Executive Director, or top management official

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>16a</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

16b If “Yes,” did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>16b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3) is only) available for public inspection. Indicate how you made these available. Check all that apply.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Own website</td>
<td>Another's website</td>
<td>X Upon request</td>
</tr>
</tbody>
</table>

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

20 State the name, address, and telephone number of the person who possesses the organization's books and records

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

---

Form 990 (2018)
## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) WILLIAM R. FEILER</td>
<td>3.30</td>
<td>TRUSTEE / CHAIR / VICE PRES.</td>
<td>0.</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(2) SELWYN GERBER</td>
<td>1.60</td>
<td>TRUSTEE / SECRETARY</td>
<td>0.10</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(3) SCOTT H. RICHLAND</td>
<td>.90</td>
<td>TRUSTEE / TREASURER</td>
<td>0.</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(4) ANTHONY CHANIN</td>
<td>.80</td>
<td>TRUSTEE / VICE PRESIDENT</td>
<td>.30</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(5) ABBY L.T. FEINMAN</td>
<td>.40</td>
<td>TRUSTEE / VICE PRESIDENT</td>
<td>0.</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(6) HAROLD J. MASOR</td>
<td>.40</td>
<td>TRUSTEE / VICE PRESIDENT</td>
<td>.10</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(7) EVAN H. SCHLESSINGER</td>
<td>.60</td>
<td>TRUSTEE / VICE PRESIDENT</td>
<td>.10</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(8) EUGENE P. STEIN</td>
<td>.70</td>
<td>TRUSTEE / VICE PRESIDENT</td>
<td>.10</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(9) ADLAI W. WERTMAN</td>
<td>.50</td>
<td>TRUSTEE / VICE PRESIDENT</td>
<td>0.</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>(10) MARTIN S. APPEL</td>
<td>.20</td>
<td>TRUSTEE</td>
<td>0.10</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(11) LEAH M. BISHOP</td>
<td>.30</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(12) ALLAN B. CUTROW</td>
<td>.30</td>
<td>TRUSTEE</td>
<td>1.10</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(13) LORIN M. FIFE</td>
<td>.80</td>
<td>TRUSTEE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>(14) MINDY FREEDMAN</td>
<td>.40</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>X</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15) ALAN J. GINDI TRUSTEE</td>
<td>.40</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(16) BERTRAND I. GINSBERG TRUSTEE</td>
<td>.30</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(17) STEVEN C. GORDON TRUSTEE</td>
<td>.20</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(18) LISA KORBATOV TRUSTEE</td>
<td>.20</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(19) MARK LAINER TRUSTEE</td>
<td>1.00</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(20) MARCIA WEINER MANKOFF TRUSTEE</td>
<td>.50</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(21) HEIDI MONKARSH TRUSTEE</td>
<td>.30</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(22) ALAN J. NUSSENBLATT TRUSTEE</td>
<td>.20</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(23) LAWRENCE RAUCH TRUSTEE</td>
<td>1.10</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(24) KAREN SANDLER TRUSTEE</td>
<td>.30</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(25) MARK N. SCHWARTZ TRUSTEE</td>
<td>.40</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total 2,511,737. 0. 430,681. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.

c Total from continuation sheets to Part VII, Section A 2,511,737. 0. 430,681.
d Total (add lines 1b and 1c) 2,511,737. 0. 430,681.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 12

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>X</td>
</tr>
</tbody>
</table>

### 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. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATTACHMENT 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization 15
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(26) ANNETTE SHAPIRO</td>
<td>.20 TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(27) MICHAEL SMOOKE</td>
<td>.20 TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(28) ALAN STERN</td>
<td>.20 TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(29) CATHY SIEGEL WEISS</td>
<td>.70 TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(30) KEENAN L. WOLENS</td>
<td>.30 TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(31) SAM S. YEBRI</td>
<td>.50 TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(32) MARVIN I. SCHOTLAND</td>
<td>46.40 PRESIDENT AND CEO</td>
<td>451,452.</td>
<td>0.</td>
<td>62,490.</td>
<td></td>
</tr>
<tr>
<td>(33) DANIEL M. ROTHBLATT</td>
<td>40.00 EXECUTIVE VICE PRESIDENT</td>
<td>302,781.</td>
<td>0.</td>
<td>42,583.</td>
<td></td>
</tr>
<tr>
<td>(34) STEVE GAMER</td>
<td>40.00 VICE PRESIDENT, ADVANCEMENT</td>
<td>266,007.</td>
<td>0.</td>
<td>22,141.</td>
<td></td>
</tr>
<tr>
<td>(35) BARRY S. LIITTMAN</td>
<td>40.00 VICE PRESIDENT, DEVELOPMENT</td>
<td>225,255.</td>
<td>0.</td>
<td>56,621.</td>
<td></td>
</tr>
<tr>
<td>(36) ELANA WIEN</td>
<td>40.00 VP, CTR DESIGNED PHILANTHROPY</td>
<td>190,913.</td>
<td>0.</td>
<td>21,115.</td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 12

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 ▶ Yes No ▶

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 ▶ Yes No ▶

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person ▶ Yes No ▶

**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. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶
### Part VII - Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(37) DAVID CARROLL</td>
<td>46.40</td>
<td>SR VP FIN &amp; ADMIN/CFO</td>
<td>X</td>
<td>248,566.</td>
<td>0. 30,989.</td>
</tr>
<tr>
<td>(38) ELLEN ROSEN</td>
<td>46.40</td>
<td>GENERAL COUNSEL</td>
<td>X</td>
<td>157,236.</td>
<td>0. 7,847.</td>
</tr>
<tr>
<td>(39) NATELLA ROYZMAN</td>
<td>40.00</td>
<td>DR, CHARITABLE GIFT PLANNING</td>
<td>0.</td>
<td>119,901.</td>
<td>0. 15,925.</td>
</tr>
<tr>
<td>(40) RIPSIMA TALVERDIAN</td>
<td>40.00</td>
<td>CONTROLLER</td>
<td>X</td>
<td>164,102.</td>
<td>0. 75,469.</td>
</tr>
<tr>
<td>(41) LEWIS GRONER</td>
<td>40.00</td>
<td>VP MARKETING &amp; COMMUNICATIONS</td>
<td>X</td>
<td>152,245.</td>
<td>0. 54,211.</td>
</tr>
<tr>
<td>(42) ROBERTA BENKOVIC</td>
<td>40.00</td>
<td>SR INVESTMENT ACCOUNTING MGR</td>
<td>X</td>
<td>123,863.</td>
<td>0. 16,111.</td>
</tr>
<tr>
<td>(43) DEWAYNE NASH</td>
<td>40.00</td>
<td>ASSISTANT CONTROLLER</td>
<td>0.</td>
<td>109,416.</td>
<td>0. 25,179.</td>
</tr>
</tbody>
</table>

1b Sub-total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

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

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

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### 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. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
## Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII.

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td>6,164,470.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar</td>
<td></td>
<td>79,386,071.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f:</td>
<td></td>
<td>28,075,359.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| h Total, Add lines 1a-1f                                |                   | 85,550,541.                          |                               |                                               |

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| g Total, Add lines 2a-2f                                |                    |                                       |                               |                                               |

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(A) Total revenue</th>
<th>(B) related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest,</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Gross rents</td>
<td></td>
<td>1,333,006.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b Less: rental expenses</td>
<td></td>
<td>1,005,889.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
<td>327,117.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d Net rental income or (loss)</td>
<td></td>
<td>327,117.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Less: cost or other basis and sales expenses</td>
<td></td>
<td>478,920,711.</td>
<td>4,364,232.</td>
<td></td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td></td>
<td>3,564,462.</td>
<td>-2,217,295.</td>
<td></td>
</tr>
<tr>
<td>7d Net gain or (loss)</td>
<td></td>
<td>1,347,167.</td>
<td>1,347,167.</td>
<td></td>
</tr>
</tbody>
</table>

| 8a Gross income from fundraising events (not including $ |                   |                                       |                               |                                               |
| of contributions reported on line 1c)                   |                   |                                       |                               |                                               |
| See Part IV, line 18                                    |                   |                                       |                               |                                               |
| 8b Less: direct expenses                                |                   |                                       |                               |                                               |
| 8c Net income or (loss) from fundraising events         |                   |                                       |                               |                                               |

| 9a Gross income from gaming activities.                 |                   |                                       |                               |                                               |
| See Part IV, line 19                                   |                   |                                       |                               |                                               |
| 9b Less: direct expenses                                |                   |                                       |                               |                                               |
| 9c Net income or (loss) from gaming activities.         |                   |                                       |                               |                                               |

| 10a Gross sales of inventory, less returns and          |                   |                                       |                               |                                               |
| allowances                                             |                   |                                       |                               |                                               |
| 10b Less: cost of goods sold                           |                   |                                       |                               |                                               |
| 10c Net income or (loss) from sales of inventory       |                   |                                       |                               |                                               |

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11a CENTER FEE REIMBURSEMENT</td>
<td>900099</td>
<td>111,000.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b ADMINISTRATIVE FEES - CUSTODIAL FUNDS</td>
<td>900099</td>
<td>803,987.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11d All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| e Total, Add lines 11a-11d                              |                    |                                       |                               |                                               |

| 12 Total revenue. See instructions.                    |                    |                                       |                               |                                               |

## JEWISH COMMUNITY FOUNDATION OF THE JEWISH 95-6111928

Form 990 (2018)  JSA8E1051 1.000

76835X 2020
## 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).

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B) Total expenses</th>
<th>(C) Program service expenses</th>
<th>(D) Management and general expenses</th>
<th>(E) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>80,192,129.</td>
<td>80,192,129.</td>
<td>0.</td>
</tr>
<tr>
<td>2.</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>3.</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>15,097,803.</td>
<td>15,097,803.</td>
<td>0.</td>
</tr>
<tr>
<td>4.</td>
<td>Benefits paid to or for members</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>6.</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>7.</td>
<td>Other salaries and wages</td>
<td>1,941,076.</td>
<td>1,941,076.</td>
<td>1,447,567.</td>
</tr>
<tr>
<td>8.</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>320,903.</td>
<td>320,903.</td>
<td>239,315.</td>
</tr>
<tr>
<td>9.</td>
<td>Other employee benefits</td>
<td>197,124.</td>
<td>197,124.</td>
<td>147,006.</td>
</tr>
<tr>
<td>11.</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td>Management</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>b.</td>
<td>Legal</td>
<td>42,520.</td>
<td>42,520.</td>
<td>42,520.</td>
</tr>
<tr>
<td>c.</td>
<td>Accounting</td>
<td>199,958.</td>
<td>199,958.</td>
<td>199,958.</td>
</tr>
<tr>
<td>d.</td>
<td>Lobbying</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>e.</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>f.</td>
<td>Investment management fees</td>
<td>512,183.</td>
<td>512,183.</td>
<td>512,183.</td>
</tr>
<tr>
<td>g.</td>
<td>Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)</td>
<td>62,399.</td>
<td>62,399.</td>
<td>41,264.</td>
</tr>
<tr>
<td>13.</td>
<td>Office expenses</td>
<td>496,026.</td>
<td>496,026.</td>
<td>328,017.</td>
</tr>
<tr>
<td>15.</td>
<td>Royalties</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>16.</td>
<td>Occupancy</td>
<td>357,531.</td>
<td>357,531.</td>
<td>236,432.</td>
</tr>
<tr>
<td>17.</td>
<td>Travel</td>
<td>37,595.</td>
<td>37,595.</td>
<td>24,861.</td>
</tr>
<tr>
<td>18.</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>19.</td>
<td>Conferences, conventions, and meetings</td>
<td>287,473.</td>
<td>287,473.</td>
<td>190,103.</td>
</tr>
<tr>
<td>20.</td>
<td>Interest</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>21.</td>
<td>Payments to affiliates</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>22.</td>
<td>Depreciation, depletion, and amortization</td>
<td>25,895.</td>
<td>25,895.</td>
<td>17,124.</td>
</tr>
<tr>
<td>23.</td>
<td>Insurance</td>
<td>163,069.</td>
<td>163,069.</td>
<td>107,836.</td>
</tr>
<tr>
<td>24.</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td>ALL OTHER EXPENSES</td>
<td>17,662.</td>
<td>17,662.</td>
<td>11,680.</td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td>All other expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>103,085,128.</td>
<td>103,085,128.</td>
<td>95,289,932.</td>
</tr>
<tr>
<td>26.</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X .

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A)</th>
<th>(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>0.1</td>
<td>0.0</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>134,540,783.2</td>
<td>72,138,451.0</td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>0.3</td>
<td>0.0</td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>2,253,653.4</td>
<td>2,402,158.0</td>
</tr>
<tr>
<td>5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete Part II of Schedule L</td>
<td>0.5</td>
<td>0.0</td>
</tr>
<tr>
<td>6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L</td>
<td>0.6</td>
<td>0.0</td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td>6,294,408.7</td>
<td>6,260,000.0</td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td>0.8</td>
<td>0.0</td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>0.9</td>
<td>0.0</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>10a</td>
<td>41,916,966.0</td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>10b</td>
<td>1,209,089.8</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td>44,139,598.11</td>
<td>742,591,380.0</td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td>94,823,729.12</td>
<td>93,358,003.0</td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td>0.13</td>
<td>0.0</td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td>60,232.14</td>
<td>55,553.0</td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td>3,301,282.15</td>
<td>3,078,369.0</td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td></td>
<td>1,007,006,468.16</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A)</th>
<th>(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>1,021,869.17</td>
<td>1,039,790.0</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td>11,178,465.18</td>
<td>14,893,736.0</td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td>0.19</td>
<td>0.0</td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td>0.20</td>
<td>0.0</td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>0.21</td>
<td>0.0</td>
</tr>
<tr>
<td>22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td>0.22</td>
<td>0.0</td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td>0.23</td>
<td>0.0</td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td>0.24</td>
<td>0.0</td>
</tr>
<tr>
<td>25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>193,551,786.25</td>
<td>177,023,277.0</td>
</tr>
<tr>
<td>26 Total liabilities. Add lines 17 through 25</td>
<td>205,752,120.26</td>
<td>192,956,803.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Assets or Fund Balances</th>
<th>(A)</th>
<th>(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>27 Unrestricted net assets</td>
<td>680,239,406.27</td>
<td>660,774,249.0</td>
</tr>
<tr>
<td>28 Temporarily restricted net assets</td>
<td>80,417,560.28</td>
<td>17,843,836.0</td>
</tr>
<tr>
<td>29 Permanently restricted net assets</td>
<td>40,597,382.29</td>
<td>89,016,903.0</td>
</tr>
<tr>
<td>30 Capital stock or trust principal, or current funds</td>
<td></td>
<td>30.0</td>
</tr>
<tr>
<td>31 Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td>31.0</td>
</tr>
<tr>
<td>32 Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td>32.0</td>
</tr>
<tr>
<td>33 Total net assets or fund balances</td>
<td>801,254,348.33</td>
<td>767,634,988.0</td>
</tr>
<tr>
<td>34 Total liabilities and net assets/fund balances</td>
<td>1,007,006,468.34</td>
<td>960,591,791.0</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>105,724,305.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>103,085,128.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>2,639,177.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>801,254,348.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>-36,258,537.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>0.</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>0.</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>0.</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>0.</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>767,634,988.</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash ☐ Accrual ☑ Other</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant? ☐</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant? ☐</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; to line 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? ☐</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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? ☐</td>
<td>Yes</td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td></td>
</tr>
</tbody>
</table>
**Public Charity Status and Public Support**

**Part I**

**Reason for Public Charity Status (All organizations must complete this part.)** See instructions.

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(iii). (Attach Schedule E (Form 990 or 990-EZ).)</td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
</tr>
<tr>
<td>4</td>
<td>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:</td>
</tr>
<tr>
<td>5</td>
<td>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.)</td>
</tr>
<tr>
<td>6</td>
<td>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.)</td>
</tr>
<tr>
<td>7</td>
<td>A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</td>
</tr>
<tr>
<td>8</td>
<td>An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:</td>
</tr>
<tr>
<td>9</td>
<td>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 Part III.)</td>
</tr>
<tr>
<td>10</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
</tr>
<tr>
<td>11</td>
<td>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 Part III.)</td>
</tr>
<tr>
<td>12</td>
<td>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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.</td>
</tr>
<tr>
<td>a</td>
<td>Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.</td>
</tr>
<tr>
<td>b</td>
<td>Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.</td>
</tr>
<tr>
<td>c</td>
<td>Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.</td>
</tr>
<tr>
<td>d</td>
<td>Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.</td>
</tr>
</tbody>
</table>

**Provide the following information about the supported organization(s).**

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>116,428,117.</td>
<td>76,388,410.</td>
<td>128,305,449.</td>
<td>110,949,957.</td>
<td>85,550,541.</td>
<td>517,622,474.</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section B. Total Support**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>14,746,796.</td>
<td>9,859,537.</td>
<td>9,367,628.</td>
<td>12,630,618.</td>
<td>18,917,499.</td>
<td>65,522,078.</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td>26,279.</td>
<td>36,686.</td>
<td>148,024.</td>
<td>855,500.</td>
<td>803,987.</td>
<td>1,870,476.</td>
</tr>
</tbody>
</table>

**Section C. Computation of Public Support Percentage**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>15 Public support percentage from 2017 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>70.50 %</td>
<td></td>
</tr>
</tbody>
</table>

**16a 33 1/3% support test - 2018.** 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.

**16b 33 1/3% support test - 2017.** 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.

**17a 10%-facts-and-circumstances test - 2018.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

**17b 10%-facts-and-circumstances test - 2017.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

**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.
### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 <strong>Total</strong> Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 <strong>Public support</strong> Subtract line 7c from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 <strong>Total support</strong> Add lines 9, 10c, 11, and 12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 <strong>First five years</strong> 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 <strong>stop here</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(line 8, column (f), divided by line 13, column (f))</th>
<th>15</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2017 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>(line 10c, column (f), divided by line 13, column (f))</th>
<th>17</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2017 Schedule A, Part III, line 17</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(line 19a, column (f), divided by line 13, column (f))</th>
<th>19</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>19a <strong>33 1/3% support tests - 2018</strong> 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 <strong>stop here</strong>. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b <strong>33 1/3% support tests - 2017</strong> 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 <strong>stop here</strong>. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?
- A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- A family member of a person described in (a) above?
- A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

### Section B. Type I Supporting Organizations

1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the supporting organization.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

### Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

### Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

### Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

   a The organization satisfied the Activities Test. Complete line 2 below.

   b The organization is the parent of each of its supported organizations. Complete line 3 below.

   c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

2 Activities Test. Answer (a) and (b) below.

   a Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
<td>2a</td>
</tr>
</tbody>
</table>

   b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2b</td>
<td></td>
<td>2b</td>
</tr>
</tbody>
</table>

3 Parent of Supported Organizations. Answer (a) and (b) below.

   a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td></td>
<td>3a</td>
</tr>
</tbody>
</table>

   b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3b</td>
<td></td>
<td>3b</td>
</tr>
</tbody>
</table>
### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 [ ] Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

#### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th>Item</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Net short-term capital gain</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 Recoveries of prior-year distributions</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Add lines 1 through 3.</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td><strong>8 Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

#### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th>Item</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Multiply line 5 by .035.</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Recoveries of prior-year distributions</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td><strong>8 Minimum Asset Amount</strong> (add line 7 to line 6)</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

#### Section C - Distributable Amount

<table>
<thead>
<tr>
<th>Item</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Adjusted net income for prior year (from Section A, line 8, Column A)</td>
<td>1</td>
</tr>
<tr>
<td>2 Enter 85% of line 1.</td>
<td>2</td>
</tr>
<tr>
<td>3 Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
<td>3</td>
</tr>
<tr>
<td>4 Enter greater of line 2 or line 3.</td>
<td>4</td>
</tr>
<tr>
<td>5 Income tax imposed in prior year</td>
<td>5</td>
</tr>
<tr>
<td><strong>6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</strong></td>
<td>6</td>
</tr>
</tbody>
</table>

7 [ ] Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D - Distributions

<table>
<thead>
<tr>
<th></th>
<th>Amounts paid to supported organizations to accomplish exempt purposes</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>12345678910 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
<td>Current Year</td>
</tr>
<tr>
<td>2</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td>Current Year</td>
</tr>
<tr>
<td>3</td>
<td>12345678910 Amounts paid to acquire exempt-use assets</td>
<td>Current Year</td>
</tr>
<tr>
<td>4</td>
<td>12345678910 Qualified set-aside amounts (prior IRS approval required)</td>
<td>Current Year</td>
</tr>
<tr>
<td>5</td>
<td>12345678910 Other distributions (describe in Part VI). See instructions.</td>
<td>Current Year</td>
</tr>
<tr>
<td>6</td>
<td>12345678910 Total annual distributions. Add lines 1 through 6.</td>
<td>Current Year</td>
</tr>
<tr>
<td>7</td>
<td>12345678910 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
<td>Current Year</td>
</tr>
<tr>
<td>8</td>
<td>12345678910 Distributable amount for 2018 from Section C, line 6</td>
<td>Current Year</td>
</tr>
<tr>
<td>9</td>
<td>12345678910 Line 8 amount divided by line 9 amount</td>
<td>Current Year</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>Excess Distributions</th>
<th>Underdistributions Pre-2018</th>
<th>Distributable Amount for 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2018 from Section C, line 6</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2018 (reasonable cause required - explain in Part VI). See instructions.</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2018</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td></td>
<td>a From 2013 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td></td>
<td>b From 2014 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td></td>
<td>c From 2015 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td></td>
<td>d From 2016 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td></td>
<td>e From 2017 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through e</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td></td>
<td>g Applied to underdistributions of prior years</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2018 distributable amount</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>i</td>
<td>Carrying from 2013 not applied (see instructions)</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2018 from Section D, line 7. $</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2018 distributable amount</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2019. Add lines 3j and 4c.</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2014 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2015 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2016 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2017 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2018 12345678910</td>
<td>12345678910</td>
<td>12345678910</td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2018
### Supplemental Information

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE A, PART II - OTHER INCOME

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>MISCELLANEOUS INCOME</td>
<td>26,279</td>
<td>36,686</td>
<td>148,024</td>
<td>855,500</td>
<td>803,987</td>
<td>1,870,476</td>
</tr>
<tr>
<td>TOTALS</td>
<td>26,279</td>
<td>36,686</td>
<td>148,024</td>
<td>855,500</td>
<td>803,987</td>
<td>1,870,476</td>
</tr>
</tbody>
</table>
Name of the organization
JEWISH COMMUNITY FOUNDATION OF THE JEWISH
FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number
95-6111928

Organization type (check one):

Filers of: Form 990 or 990-EZ

Section:

☐ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor’s total contributions.

Special Rules

☑ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering “N/A” in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .....

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer “No” on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn’t meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
### Part I: Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$11,350,000.</td>
<td>X Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
<td>$5,900,000.</td>
<td>X Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>$4,239,774.</td>
<td>X Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>X Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td></td>
<td>$3,587,820.</td>
<td>X Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td>$3,000,000.</td>
<td>X Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td></td>
<td>$3,000,000.</td>
<td>X Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
## Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td>$3,000,000.</td>
<td>Noncash</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>$2,897,452.</td>
<td>Noncash</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>$2,841,163.</td>
<td>Noncash</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>$2,625,000.</td>
<td>Noncash</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>$2,229,800.</td>
<td>Noncash</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>$1,800,000.</td>
<td>Noncash</td>
</tr>
</tbody>
</table>
## Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>14,000 SHARES OF STOCK IN APPLE, INC.</td>
<td>$4,228,283.</td>
<td>09/06/2018</td>
</tr>
<tr>
<td></td>
<td>10,000 SHARES OF STOCK IN WALT DISNEY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>61,853 SHARES OF PLAINS ALL AMERICAN PIPELINE, LP</td>
<td>$2,897,452.</td>
<td>VAR</td>
</tr>
<tr>
<td></td>
<td>40,035 SHARES OF STOCK IN FRESHPET INC.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>PARTNERSHIP INTEREST IN VARIOUS FUNDS</td>
<td>$2,841,163.</td>
<td>12/31/2018</td>
</tr>
<tr>
<td>11</td>
<td>720,000 SHARES OF STOCK IN DOCTOR EVIDENCE LLC</td>
<td>$2,224,800.</td>
<td>10/29/2018</td>
</tr>
<tr>
<td></td>
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</tbody>
</table>
### Part III

*Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.*

Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<thead>
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</thead>
<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

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<thead>
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<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
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</thead>
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</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

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<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
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</thead>
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</tbody>
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<thead>
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<th>(a) No. from Part I</th>
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<th>(d) Description of how gift is held</th>
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</thead>
<tbody>
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<td></td>
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</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

JEWISH COMMUNITY FOUNDATION OF THE JEWISH
FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number

95-611928

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

1. Total number at end of year .

2. Aggregate value of contributions to (during year)

3. Aggregate value of 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?

   Yes ☑ No

6. Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

   Yes ☑ No

Part II

Conservation Easements.

Complete if the organization answered "Yes" on 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 education)
   - Protection of natural habitat
   - Preservation of open space
   - Preservation of a historically important land area
   - Preservation of a certified historic structure

2. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

   a. Total number of conservation easements .
   b. Total acreage restricted by conservation easements .
   c. Number of conservation easements on a certified historic structure included in (a) .
   d. Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcement of the conservation easements it holds?

   Yes ☑ No

6. Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7. Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation 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 XIII, 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" on Form 990, Part IV, line 8.

1a. If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.

1b. If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items:

   a. Revenue included on 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 acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- Public exhibition
- Scholarly research
- Preservation for future generations

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

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**

**Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on 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 XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
</tbody>
</table>

1d 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, for escrow or custodial account liability? □ Yes □ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

**Part V**

**Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

<table>
<thead>
<tr>
<th></th>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1a Beginning of year balance</strong></td>
<td>177,469,875.</td>
<td>162,071,268.</td>
<td>139,597,685.</td>
<td>143,858,416.</td>
<td>142,429,198.</td>
</tr>
<tr>
<td><strong>b Contributions</strong></td>
<td>8,046,821.</td>
<td>1,840,512.</td>
<td>20,659,757.</td>
<td>2,437,599.</td>
<td>2,320,504.</td>
</tr>
<tr>
<td><strong>c Net investment earnings, gains, and losses</strong></td>
<td>-9,115,323.</td>
<td>22,444,268.</td>
<td>8,773,594.</td>
<td>-2,690,029.</td>
<td>5,156,614.</td>
</tr>
<tr>
<td><strong>d Grants or scholarships</strong></td>
<td>7,151,350.</td>
<td>6,566,664.</td>
<td>4,406,349.</td>
<td>1,753,927.</td>
<td>3,516,638.</td>
</tr>
<tr>
<td><strong>e Other expenditures for facilities and programs</strong></td>
<td>881,335.</td>
<td>2,319,509.</td>
<td>2,553,237.</td>
<td>2,254,374.</td>
<td>2,531,262.</td>
</tr>
<tr>
<td><strong>g End of year balance</strong></td>
<td>168,368,688.</td>
<td>177,469,875.</td>
<td>162,071,268.</td>
<td>139,597,685.</td>
<td>143,858,416.</td>
</tr>
</tbody>
</table>

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ 37.0000 %

b Permanent endowment ▶ 63.0000 %

c Temporarily restricted endowment ▶ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? □ Yes □ No

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

**Part VI**

**Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>1,250,000.</td>
<td></td>
<td>1,250,000.</td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td>39,394,921.</td>
<td></td>
<td>39,394,921.</td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td>200,000.</td>
<td>200,000.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>609,550.</td>
<td>579,873.</td>
<td>29,677.</td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td>462,495.</td>
<td>429,216.</td>
<td>33,279.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c) ▶ 40,707,877.
### Part VII  Investments - Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A) PARTNERSHIP INTERESTS</td>
<td>87,080,386</td>
<td></td>
</tr>
<tr>
<td>(B) ALTERNATIVE INVESTMENTS</td>
<td>6,277,617</td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)</strong></td>
<td>93,358,003</td>
<td></td>
</tr>
</tbody>
</table>

### Part VIII  Investments - Program Related.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX  Other Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Part X  Other Liabilities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) AMOUNTS HELD IN CUSTODY FOR OTHERS</td>
<td>128,505,875.</td>
</tr>
<tr>
<td>(3) AMOUNTS HELD WITH NO VARIANCE</td>
<td>46,676,473.</td>
</tr>
<tr>
<td>(4) LIABILITY UNDER TRUST AGREEMENT</td>
<td>1,840,929.</td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)</strong></td>
<td>177,023,277.</td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X
### Part XI  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amounts</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains (losses) on investments</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
<td>2c</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>2d</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

### Part XII  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amounts</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Donated services and use of facilities</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Prior year adjustments</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Other losses</td>
<td>2c</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>2d</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

### Part XIII  Supplemental Information.

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also, complete this part to provide any additional information.

SEE PAGE 5
SCHEDULE D, PART IV

ESCROW AND CUSTODIAL ARRANGEMENTS

THE JEWISH COMMUNITY FOUNDATION HOLDS ASSETS IN THE COMMON INVESTMENT
POOL ON BEHALF OF OTHER TAX-EXEMPT ORGANIZATIONS. THESE ASSETS ARE
REPORTED IN OTHER SECURITIES ON SCHEDULE D, PART VII WITH AN OFFSETTING
LIABILITY IN SCHEDULE D, PART X.

SCHEDULE D, PART V, LINE 4

INTENDED USES OF ENDOWMENT FUNDS

GRANTS ARE PROVIDED VIA ENDOWMENT FUNDS THAT THE FOUNDATION MANAGES. AN
ENDOWMENT FUND IS CREATED BY SOMEONE FOR ONE OR MORE CHARITABLE PURPOSES,
AND IT BECOMES A PERMANENT LEGACY THAT PROVIDES ANNUAL SUPPORT TO A CAUSE
OR ORGANIZATION. THESE INCLUDE:

PERMANENT LEGACY FUND - AN ENDOWMENT FUND THAT SUPPORTS THE FOUNDATION'S
ANNUAL GRANTS PROGRAMS AND OPERATIONS, WHICH PROVIDE SEED FUNDING FOR
EMERGING COMMUNITY NEEDS.

FIELD OF INTEREST LEGACY FUND - THROUGH THESE ENDOWMENT FUNDS, DONORS MAY
DESIGNATE GENERAL CAUSES OR FIELDS OF INTEREST THAT THEY WISH TO SUPPORT.
THE FOUNDATION MAKES SURE THEIR CHARITABLE INTENTIONS ARE FULFILLED, EVEN
AFTER THE DONORS THEMSELVES ARE NO LONGER LIVING.

RESTRICTED LEGACY FUND - THIS IS AN ENDOWMENT FUND THROUGH WHICH A DONOR
MAY SUPPORT ONE OR SEVERAL PARTICULAR CHARITIES OR NONPROFITS.
SUPPLEMENTAL INFORMATION (continued)

SCHEDULE D, PART X, LINE 2

INCOME TAXES - THE FOUNDATION AND ITS SUPPORT FOUNDATIONS ARE PUBLIC
CHARITIES AND ARE EXEMPT FROM FEDERAL INCOME AND CALIFORNIA FRANCHISE
TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND
CORRESPONDING CALIFORNIA REVENUE AND TAXATION CODE SECTIONS. THE
FOUNDATION AND ITS SUPPORT FOUNDATIONS DO NOT HAVE ANY MATERIAL UNCERTAIN
TAX POSITIONS. THE FOUNDATION AND ITS SUPPORT FOUNDATIONS FILE
INFORMATION ORGANIZATION RETURNS IN THE UNITED STATES FEDERAL
JURISDICTION AND WITH THE FRANCHISE TAX BOARD IN THE STATE OF CALIFORNIA.
**Part I**

**General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1. **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3. **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

<table>
<thead>
<tr>
<th>Region</th>
<th>Number of offices in the region</th>
<th>Number of employees, agents, and independent contractors in the region</th>
<th>Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CENTRAL AMERICA/ CARIBBEAN</td>
<td>0.</td>
<td>0.</td>
<td>INVESTMENTS</td>
<td></td>
<td>20,522,896.</td>
</tr>
<tr>
<td>(2) MIDDLE EAST AND NORTH AFRICA</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>13,359,735.</td>
</tr>
<tr>
<td>(3) EUROPE</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>408,800.</td>
</tr>
<tr>
<td>(4) RUSSIA/INDEPENDENT STATES</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>344,780.</td>
</tr>
<tr>
<td>(5) EAST ASIA AND THE PACIFIC</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>295,000.</td>
</tr>
<tr>
<td>(6) SUB-SAHARAN AFRICA</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>238,160.</td>
</tr>
<tr>
<td>(7) NORTH AMERICA</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>116,028.</td>
</tr>
<tr>
<td>(8) SOUTH AMERICA</td>
<td>0.</td>
<td>0.</td>
<td>GRANTMAKING</td>
<td></td>
<td>30,000.</td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
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</tr>
<tr>
<td>(11)</td>
<td></td>
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<td>(12)</td>
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<td>(15)</td>
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<td></td>
</tr>
<tr>
<td>(16)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) Subtotal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>35,315,399.</td>
</tr>
<tr>
<td></td>
<td>Total from continuation sheets to Part I</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Totals (add lines 3a and 3b)</td>
<td></td>
<td></td>
<td></td>
<td>35,315,399.</td>
</tr>
</tbody>
</table>
### Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>JEWISH COMMUNITY FOUNDATION OF THE JEWISH</td>
<td>95-6111928</td>
<td>MIDDLE EAST/NORTH AFRICA</td>
<td>GENERAL</td>
<td>SUPPORT</td>
<td>50,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>84,523.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>148,800.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>25,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>59,580.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>30,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>9,710.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>87,500.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>275,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>7,250.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>8,200.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
<td>8,300.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>SUPPORT</td>
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2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
## Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
## Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
## Part II
Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
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<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
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</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities
### Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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</table>

2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3. Enter total number of other organizations or entities.
**Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered “Yes” on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
## Part II
### Grants and Other Assistance to Organizations or Entities Outside the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name of organization</th>
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<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

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<tr>
<th>(1)</th>
<th>(a) Name of organization</th>
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<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
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2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3. Enter total number of other organizations or entities.
**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered “Yes” on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>JEWISH COMMUNITY FOUNDATION OF THE JEWISH 95-6111928</td>
<td></td>
<td>GENERAL</td>
<td></td>
<td>12,250.</td>
<td>CHECK</td>
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<tr>
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<td>GENERAL</td>
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<td>1</td>
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<td>SUB-SAHARAN AFRICA</td>
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<td>1</td>
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<td>SUPPORT</td>
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<td>NORTH AMERICA</td>
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<td>SUPPORT</td>
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<td>11,670.</td>
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<td>1</td>
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<td>SUPPORT</td>
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<td>GENERAL</td>
<td>10,000.</td>
<td>CHECK</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities.
## Part II  Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered “Yes” on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
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<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td></td>
<td>MIDDLE EAST/NORTH AFRICA</td>
<td>GENERAL</td>
<td>10,000.</td>
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<td>MIDDLE EAST/NORTH AFRICA</td>
<td>GENERAL</td>
<td>14,760.</td>
<td>CHECK</td>
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<td>MIDDLE EAST/NORTH AFRICA</td>
<td>SUPPORT</td>
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<td>MIDDLE EAST/NORTH AFRICA</td>
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</tbody>
</table>

2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ▶ 164.

3. Enter total number of other organizations or entities. ▶
### Part III  Grants and Other Assistance to Individuals Outside the United States.
Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
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<tr>
<td></td>
<td>Question</td>
<td>Yes</td>
<td>No</td>
<td></td>
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</tr>
<tr>
<td>1</td>
<td>Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If &quot;Yes,” the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).</td>
<td>X</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization have an interest in a foreign trust during the tax year? If &quot;Yes,” the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don’t file with Form 990).</td>
<td>No</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization have an ownership interest in a foreign corporation during the tax year? If &quot;Yes,” the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471).</td>
<td>X</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If &quot;Yes,” the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).</td>
<td>X</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization have an ownership interest in a foreign partnership during the tax year? If &quot;Yes,” the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).</td>
<td>X</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have any operations in or related to any boycotting countries during the tax year? If &quot;Yes,” the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don’t file with Form 990).</td>
<td>No</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F, PART I, LINE 2

ORGANIZATION’S PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE U.S.

ALL GRANTS IN SCHEDULE F ARE TO DOMESTIC 501(C)(3) ORGANIZATIONS THAT PROVIDE GRANTS OR OTHER ASSISTANCE TO DESIGNATED FOREIGN ORGANIZATIONS.


SCHEDULE F, PART II

AMOUNTS REPORTED ON PART IX, LINE 3 REPRESENT GRANTS AND CONTRIBUTIONS EXPENSE ACCRUED FOR GAAP PURPOSES IN THE ORGANIZATION’S BOOKS AND RECORDS. AMOUNTS REPORTED ON SCHEDULE F, PART II REPRESENT GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   [ ] Yes  [x] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1736 FAMILY CRISIS CENTER</td>
<td>95-3989251</td>
<td>501(C)(3)</td>
<td>25,000.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2116 ARLINGTON AVE LOS ANGELES, CA 90018</td>
<td>13-0887610</td>
<td>501(C)(3)</td>
<td>150,200.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>70 FACES MEDIA</td>
<td>27-4311567</td>
<td>501(C)(3)</td>
<td>35,000.</td>
<td>General Support</td>
<td></td>
<td></td>
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<tr>
<td>4</td>
<td>2830 S. CENTRAL AVE. LOS ANGELES, CA 90011</td>
<td>46-3646857</td>
<td>501(C)(3)</td>
<td>8,600.</td>
<td>General Support</td>
<td></td>
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<tr>
<td>5</td>
<td>A PURPOSEFUL RESCUE INC</td>
<td>85-0475649</td>
<td>501(C)(3)</td>
<td>25,000.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>4712 ADMIRALTY WAY MARINA DEL REY, CA 90292</td>
<td>47-3814056</td>
<td>501(C)(3)</td>
<td>103,000.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>A NOISE WITHIN</td>
<td>1300 EAST GREEN ST. PASADENA, CA 91106</td>
<td>501(C)(3)</td>
<td>11,000.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>ABILITYFIRST</td>
<td>17701 DEVONSHIRE ST. NORTHBRIDGE, CA 91325</td>
<td>501(C)(3)</td>
<td>48,600.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>A ROOM OF HER OWN FOUNDATION</td>
<td>1313 W. 8TH ST. LOS ANGELES, CA 90017</td>
<td>501(C)(3)</td>
<td>216,100.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>A PLACE CALLED HOME</td>
<td>9040 W. PICO BLVD. LOS ANGELES, CA 90035</td>
<td>501(C)(3)</td>
<td>66,560.</td>
<td>General Support</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

#### Part I
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>#</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1 | ADAT ARI EL  
   12020 BURBANK BLVD VALLEY VILLAGE, CA 91607 | 23-7366318 | 501(C)(3) | 63,060. |  |  |  | GENERAL SUPPORT |
| 2 | ADAT SHALOM RECONSTRUCTIONIST CONGREGATION  
   7727 PERSIMMON TREE LN. BETHESDA, MD 20817 | 52-1763027 | 501(C)(3) | 5,450. |  |  |  | GENERAL SUPPORT |
| 3 | ADERES BAIS YAAYOV INC.  
   855 VERMONT AVE. LAKEWOOD, NJ 08701 | 82-3371423 | 501(C)(3) | 12,000. |  |  |  |  |
| 4 | ADMINISTRATORS OF THE TULANE EDU. FUND  
   1555 FOYDRAS ST #1000 NEW ORLEANS, LA 70112 | 72-0423889 | 501(C)(3) | 6,000. |  |  |  | GENERAL SUPPORT |
| 5 | ADVANCING THE INTERESTS OF ANIMALS  
   P.O. BOX 5066 PALM SPRINGS, CA 92263 | 37-1422821 | 501(C)(3) | 31,000. |  |  |  | GENERAL SUPPORT |
| 6 | AHA FOUNDATION INC AKA MACKENZIE MCNAUGHTON  
   130 7TH AVE., #236 NEW YORK, NY 10011 | 33-1185369 | 501(C)(3) | 100,000. |  |  |  |  |
| 7 | AISH TAMID OF LOS ANGELES  
   5909 W. 3RD ST. LOS ANGELES, CA 90036 | 90-0086051 | 501(C)(3) | 6,810. |  |  |  | GENERAL SUPPORT |
| 8 | ALEPH INSTITUTE  
   9540 COLLINS AVE. SURFSIDE, FL 33154 | 59-2291627 | 501(C)(3) | 108,020. |  |  |  | GENERAL SUPPORT |
| 9 | ALEPH SOCIETY INC.  
   25 WEST 45TH ST., # 1405 NEW YORK, NY 10036 | 13-3472524 | 501(C)(3) | 86,000. |  |  |  | GENERAL SUPPORT |
| 10 | ALEXANDER HAMILTON HIGH SCHOOL ALUMNI ASSOC  
   P.O. BOX 64-340 LOS ANGELES, CA 90064 | 95-4673692 | 501(C)(3) | 5,100. |  |  |  | GENERAL SUPPORT |
| 11 | ALLIANCE FOR CHILDREN'S RIGHTS  
   3333 WILSHIRE BLVD., STE 550 LA, CA 90010 | 95-4358213 | 501(C)(3) | 58,700. |  |  |  | GENERAL SUPPORT |
| 12 | ALLIANCE FOR COLLEGE - READY PUBLIC SCHOOLS  
   601 S. FIGUEROA ST., 4TH FL. LA, CA 90017 | 95-4779029 | 501(C)(3) | 25,000. |  |  |  | GENERAL SUPPORT |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**Name of the organization:** JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

**Employer identification number:** 95-6111928

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
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<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of non-cash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALUM RABBINIC COL. KNESSETH IS. OF SLABODKA</td>
<td>13-5600406</td>
<td>501(C)(3)</td>
<td>8,500.</td>
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<td>ALSHEIMER'S DISEASE &amp; REL. DISORDERS ASSOC</td>
<td>13-3039601</td>
<td>501(C)(3)</td>
<td>34,480.</td>
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<tr>
<td>AM. ACADEMY ALLERGY ASTHMA &amp; IMMUNOLOGY FDN</td>
<td>555 EAST WELLS ST #1100 MILWAUKEE, WI 53202</td>
<td>501(C)(3)</td>
<td>20,000.</td>
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<td>AM. COLLEGE OF EMPLOYEE BENEFITS COUNSEL</td>
<td>45-1495723</td>
<td>501(C)(3)</td>
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<td>AM. ENTERPRISE INST FOR PUBLIC POLICY RSCH</td>
<td>34-1925042</td>
<td>501(C)(3)</td>
<td>10,000.</td>
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<td>AMERICA NEEDS YOU AKA NEW YORK NEEDS YOU</td>
<td>589 8TH AVE., 5TH FL. NEW YORK, NY 10018</td>
<td>501(C)(3)</td>
<td>27-0601596</td>
<td>360,500.</td>
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<td>AMERICA SUPPORTING AMERICANS</td>
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<td>AMERICAN CANCER SOCIETY INC.</td>
<td>13-1788491</td>
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<td>5,900.</td>
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<td>AMERICAN CIVIL LIBERTIES UNION FDN, INC.</td>
<td>125 BROAD ST 18TH FL NEW YORK NY 10004-2400</td>
<td>501(C)(3)</td>
<td>6,400.</td>
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<tr>
<td>AMERICAN FILM INSTITUTE</td>
<td>2021 N. WESTERN AVE. LOS ANGELES, CA 90027</td>
<td>501(C)(3)</td>
<td>12,000.</td>
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<tr>
<td>AMERICAN FRIENDS OF AISH HATORAH-W REG INC</td>
<td>1417 S. DOREN DR. LOS ANGELES, CA 90035</td>
<td>501(C)(3)</td>
<td>242,640.</td>
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<td>AMERICAN HEART ASSOCIATION, INC.</td>
<td>816 S. FIGUEROA ST. LOS ANGELES, CA 90017</td>
<td>501(C)(3)</td>
<td>10,000.</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
[Attach to Form 990.]

Go to www.irs.gov/Form990 for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

---

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
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<th>Amount of cash grant</th>
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<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>AMERICAN ISRAEL EDUCATION FOUNDATION, INC.</td>
<td>52-1623781</td>
<td>501(c)(3)</td>
<td>741,000</td>
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<td>2</td>
<td>AMERICAN JEWISH COMMITTEE</td>
<td>13-5563393</td>
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<td>3</td>
<td>AMERICAN JEWISH UNIVERSITY</td>
<td>95-1684064</td>
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<td>4</td>
<td>AMERICAN NATIONAL RED CROSS</td>
<td>52-0196605</td>
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<td>5</td>
<td>AMERICAN PSYCHIATRIC ASSOCIATION FOUNDATION</td>
<td>13-0433740</td>
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<td>32,377</td>
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<td>6</td>
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<td>7</td>
<td>AMERICANS FOR PEACE NOW, INC.</td>
<td>13-3509867</td>
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<td>8</td>
<td>AMERICANS FOR THE ARTS, INC.</td>
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<td>9</td>
<td>AMERICAS VOICES IN ISRAEL</td>
<td>30-0110364</td>
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<td>ANGELS AT RISK</td>
<td>24-1100549</td>
<td>501(c)(3)</td>
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<td>12</td>
<td>ANTI-RECIDIVISM COALITION</td>
<td>46-2140915</td>
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<td>10,000</td>
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</tbody>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>11725 W. SUNSET BLVD. LOS ANGELES, CA 90049</td>
<td>95-4463705</td>
<td>501(C)(3)</td>
<td>250,000.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>2.</td>
<td>ARNOLD HAMMER MUSEUM OF ART &amp; CULTURAL CTR 10889 WILSHIRE BLVD. LOS ANGELES, CA 90024</td>
<td>95-4217197</td>
<td>501(C)(3)</td>
<td>300,350.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>3.</td>
<td>ARS NOVA THEATER INC. 511 W. 54TH ST. NEW YORK, NY 10019</td>
<td>80-0339038</td>
<td>501(C)(3)</td>
<td>12,500.</td>
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<td>GENERAL SUPPORT</td>
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<td>4.</td>
<td>ART INSTITUTE OF CHICAGO 111 SOUTH MICHIGAN AVENUE CHICAGO, IL 60603</td>
<td>36-2167725</td>
<td>501(C)(3)</td>
<td>10,000.</td>
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<td>GENERAL SUPPORT</td>
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<td>5.</td>
<td>ARTISTS 4 ISRAEL INC. 1060 S. COCHRAN AVE; UNIT 4 LA, CA 90019</td>
<td>80-0415734</td>
<td>501(C)(3)</td>
<td>50,000.</td>
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<td>6.</td>
<td>ASHREINU CORP. 369 N. FAIRFAX, #4 LOS ANGELES, CA 90036</td>
<td>95-4178454</td>
<td>501(C)(3)</td>
<td>29,460.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>7.</td>
<td>ASIAN AMERICANS ADVANCING JUSTICE LA 1145 WILSHIRE BLVD LOS ANGELES, CA 90017</td>
<td>95-3854152</td>
<td>501(C)(3)</td>
<td>20,000.</td>
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<td>GENERAL SUPPORT</td>
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<td>8.</td>
<td>ASPEN ART MUSEUM 637 E HYMAN AVE. ASPEN, CO 81611</td>
<td>84-0746671</td>
<td>501(C)(3)</td>
<td>12,600.</td>
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<td>9.</td>
<td>ASPEN INSTITUTE, INC. 1000 N. 3RD ST. ASPEN, CO 81611</td>
<td>84-0390006</td>
<td>501(C)(3)</td>
<td>11,000.</td>
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<td>GENERAL SUPPORT</td>
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<td>11.</td>
<td>AUTISM SPEAKS INC. 6330 SAN VICENTE BLVD., # 401 LA, CA 90048</td>
<td>20-323938</td>
<td>501(C)(3)</td>
<td>11,280.</td>
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<td>12.</td>
<td>BABY2BABY 6435 WILSHIRE BLVD. LOS ANGELES, CA 90048</td>
<td>46-4503539</td>
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<td>42,800.</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1. (a) Name and address of organization or government

   (b) EIN

   (c) IRC section (if applicable)

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   (e) Amount of non-cash assistance

   (f) Method of valuation (book, FMV, appraisal, other)

   (g) Description of non-cash assistance

   (h) Purpose of grant or assistance

   (1) BAIS BETZALEL

       8850 PICO BLVD., LOS ANGELES, CA 90035

       95-4552970

       501(C)(3)

       11,450.

       GENERAL SUPPORT

   (2) BAIS CHANA HERITAGE SCHOOL

       7162 BEVERLY BLVD., #341 LA, CA 90036

       46-2869189

       501(C)(3)

       12,000.

       GENERAL SUPPORT

   (3) BAIS CHAYA MUSHKA SCHOOL FOR GIRLS INC.

       9051 W. PICO BLVD LOS ANGELES, CA 90035

       95-4439460

       501(C)(3)

       8,000.

       GENERAL SUPPORT

   (4) BAIS HILLEL INC.

       11 BELGIAN HILL RD., LAKEWOOD, NJ 08701

       81-4277289

       501(C)(3)

       57,500.

       GENERAL SUPPORT

   (5) BAIS MEDRASH ATHERES SHLOMO

       P.O. BOX 709 PEEKSKILL, NY 10566

       81-3055012

       501(C)(3)

       60,000.

       GENERAL SUPPORT

   (6) BAIS MEDRASH OF CLIFTON

       P.O. BOX 5117 PASSAIC, NJ 07055

       34-2055521

       501(C)(3)

       20,200.

       GENERAL SUPPORT

   (7) BAIS MEDRASH OF MILLER ROAD

       270 MILLER RD., LAKEWOOD, NJ 08701

       20-4963496

       501(C)(3)

       20,000.

       GENERAL SUPPORT

   (8) BAIS MEDRASH OF ROCKLAND INC.

       38 SOUTH MADISON SPRING VALLEY, NY 10977

       27-2863100

       501(C)(3)

       10,000.

       GENERAL SUPPORT

   (9) BAIS YAAROV SCHOOL FOR GIRLS

       7353 BEVERLY BLVD., LOS ANGELES, CA 90036

       95-3127279

       501(C)(3)

       52,390.

       GENERAL SUPPORT

   (10) BARUCH COLLEGE FUND

       1 BERNARD BARUCH WAY NEW YORK, NY 10010

       23-7039817

       501(C)(3)

       8,000.

       GENERAL SUPPORT

   (11) BAY AREA CLEAN WATER AGENCIES

       P.O. BOX 24055, MS 59 OAKLAND, CA 94623

       94-3389334

       GOV

       15,000.

       GENERAL SUPPORT

   (12) BAYIT SHELANU SYNAGOGUE

       10825 ASHY AVE., LOS ANGELES, CA 90064

       20-8825073

       501(C)(3)

       9,000.

       GENERAL SUPPORT

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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   - Yes [ ]  
   - No [ ]

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<td>8831 VENICE BLVD. LOS ANGELES, CA 90034</td>
<td>77-0152646</td>
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<td>127,477.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>BEND THE ARC: A JEWISH PSHIP FOR JUSTICE</td>
<td>330 7TH AVE., #1902 NEW YORK, NY 10001</td>
<td>52-1332694</td>
<td>501(c)(3)</td>
<td>27,900.</td>
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<tr>
<td>BERKELEY EAST BAY HUMANE SOCIETY, INC.</td>
<td>2700 9TH ST. BERKELEY, CA 94710</td>
<td>94-1347069</td>
<td>501(c)(3)</td>
<td>10,000.</td>
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<td>BET TZEDEK</td>
<td>3250 WILSHIRE BLVD LOS ANGELES, CA 90010</td>
<td>23-7304205</td>
<td>501(c)(3)</td>
<td>398,660.</td>
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<td>BETH JACOB CONGREGATION</td>
<td>9030 W OLYMPIC BLVD BEVERLY HILLS, CA 90211</td>
<td>95-1652903</td>
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<td>198,058.</td>
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<td>BETH MEDRASH GOVHA OF AMERICA</td>
<td>617 6TH ST. LAKEWOOD, NJ 08701</td>
<td>21-0634542</td>
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<td>16,500.</td>
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<td>BETH MEDRASH GOVHA OF LAKEWOOD INC.</td>
<td>617 6TH ST. LAKEWOOD, NJ 08701-2754</td>
<td>22-3839462</td>
<td>501(c)(3)</td>
<td>87,000.</td>
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<td>GENERAL SUPPORT</td>
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<td>BETH MEDRASH OF ASBURY PARK INC.</td>
<td>1500 VERMONT AVE. LAKEWOOD, NJ 08701</td>
<td>27-0694073</td>
<td>501(c)(3)</td>
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<td>BETH TEFILLA OF MONSEY</td>
<td>PO BOX 107 MONSEY, NY 10952</td>
<td>51-0168555</td>
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<td>BEVERLY HILLS JEWISH COMMUNITY</td>
<td>910 N. BEVERLY DR. BEVERLY HILLS, CA 90210</td>
<td>27-2454499</td>
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<td>BEVERLY HILLS POLICE OFF. BENEVOLENT FUND</td>
<td>9663 SANTA MONICA BLVD., #786 BH, CA 90210</td>
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<td>1900 AVE. OF THE STARS, # 400 LA, CA 90067</td>
<td>77-0319017</td>
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<td>7,500.</td>
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<td>GENERAL SUPPORT</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>1</td>
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<td>95-1904857</td>
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<td>6</td>
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<td>22-3251871</td>
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<td>93 PROSPECT AVE. LAKewood, NJ 08701</td>
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<td>8</td>
<td>BIRKAT VITZCHOK INC.</td>
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<td>9</td>
<td>BIRTHRIGHT ISRAEL FOUNDATION</td>
<td>13-4092050</td>
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<td>10</td>
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<td>95-1916023</td>
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<td>11</td>
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<td>12</td>
<td>BNEI AKIVA OF LOS ANGELES</td>
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<td>187,380.</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1(a) Name and address of organization or government</th>
<th>1(b) EIN</th>
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<th>1(d) Amount of cash grant</th>
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<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of noncash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>(1) BNEI DAVID FOUNDATION 333 OGDEN AVE. TEANECK, NJ 07666</td>
<td>81-3428122</td>
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<td>50,000.</td>
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<td>(2) BODY TRAFFIC 1171 S. ROBERTSON BLVD. #193 LA, CA 90035</td>
<td>26-1943997</td>
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<td>(3) BOMA SHUL 500 E. 77TH ST., #529 NEW YORK, NY 10162</td>
<td>83-1792039</td>
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<td>18,000.</td>
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<td>(4) BOY SCOUTS OF AMERICA COUNCIL 2333 SCOUT WAY LOS ANGELES, CA 90026</td>
<td>22-1576300</td>
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<td>27,500.</td>
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<tr>
<td>(5) BRANDEIS UNIVERSITY 415 S ST MAIL STOP 132 WALTRAM, MA 02454</td>
<td>04-2103552</td>
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<td>27,200.</td>
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<tr>
<td>(6) BREAST CANCER RESEARCH FOUNDATION INC. 28 WEST 44TH ST., # 609 NEW YORK, NY 10036</td>
<td>13-3727250</td>
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<td>9,750.</td>
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<td>(7) BREEYAR 11664 NATIONAL BLVD., #309 LA, CA 90064</td>
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<td>8,156.</td>
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<td>(8) BRENTWOOD SCHOOL 100 S. BARRINGTON PL. LOS ANGELES, CA 90049</td>
<td>95-1426236</td>
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<td>77,000.</td>
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<td>(9) BRIDGES ACADEMY 3921 LAUREL CANYON BLVD STUDIO CITY CA91604</td>
<td>95-4659439</td>
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<td>(10) BRIGHT STAR SCHOOLS 2636 MANSFIELD AVE LOS ANGELES, CA 90016</td>
<td>55-0806673</td>
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<td>(11) BROWN HILLEL FDN. - HILLEL THE FDN. 80 BROWN ST PROVIDENCE, RI 02906</td>
<td>05-6019146</td>
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<td>26,000.</td>
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<tr>
<td>(12) BROWN UNIVERSITY BOX 1877 1 PROSPECT ST PROVIDENCE, RI 02912</td>
<td>05-0258809</td>
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<td>36,000.</td>
<td>GENERAL SUPPORT</td>
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</table>

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. BUDDY PROGRAM INC.  110 E. HALLAM ST., #125 ASPEN, CO 81611</td>
<td>74-2594693</td>
<td>501(C)(3)</td>
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<td>2. BUREAU OF JEWISH EDUCATION OF GREATER LA  6505 WILSHIRE BLVD., #105 LA, CA 90048</td>
<td>95-4280178</td>
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<td>696,716</td>
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<td>3. CALIFORNIA COMMUNITY FOUNDATION  221 S. FIGUEROA ST., #400 LA, CA 90012</td>
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<td>4. CALIFORNIA INST FOR YIDDISH LANG. &amp; CULTURE  333 WASHINGTON BLVD MARINA DEL REY CA 90292</td>
<td>95-4833575</td>
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<td>7,600</td>
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<tr>
<td>5. CALIFORNIA ONCOLOGY RESEARCH INSTITUTE INC.  1158 26TH ST BOX 383 SANTA MONICA, CA 90403</td>
<td>42-1757010</td>
<td>501(C)(3)</td>
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<td>6. CALIFORNIA SCIENCE CENTER FOUNDATION  700 EXPOSITION PARK DRIVE LA, CA 90037</td>
<td>95-2210527</td>
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<td>10,009,147</td>
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<td>7. CALIFORNIA STATE UNIVERSITY NORTHRIDGE FDN  18111 NORDHOFF ST. NORTHRIDGE, CA 91330</td>
<td>95-6196006</td>
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<td>27-3352587</td>
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<td>9. CAMP RAMAR IN CALIFORNIA INC.  17525 VENTURA BLVD, #310 ENCINO, CA 91316</td>
<td>95-1843131</td>
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<td>10. CANCER RESEARCH INSTITUTE, INC.  29 BROADWAY 4TH FL. NEW YORK, NY 10006</td>
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<td>11. CANCER SUPPORT COMMUNITY - SANTA MONICA  1990 S BUNDY DR. #100 LOS ANGELES, CA 90025</td>
<td>33-0287070</td>
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<td>20-4100028</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Open to Public Inspection

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Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes  No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th></th>
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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>CEDARS-SINAI MEDICAL CENTER</td>
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<td>CENTER FOR BIOLOGICAL DIVERSITY INC.</td>
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<td>501(c)(3)</td>
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<td>5</td>
<td>CENTER FOR EARLY EDUCATION</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to www.irs.gov/Form990 for the latest information.

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) CHABAD AT CSUN INC.</td>
<td>17833 PRAIRIE ST. NORTHRIGE, CA 91325</td>
<td>20-8117991</td>
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<td>(2) CHABAD HOUSE BOWERY INC</td>
<td>353 BOWERY NEW YORK, NY 10003</td>
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<td>(3) CHABAD OF BRANDEIS INC.</td>
<td>54 TURNER STREET WALTHAM, MA 02463</td>
<td>04-3567541</td>
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<td>(5) CHABAD OF BURBANK</td>
<td>2415 W. MAGNOLIA BLVD. BURBANK, CA 91506</td>
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<td>(6) CHABAD OF CALIFORNIA</td>
<td>644 S. BUNDO DR. LOS ANGELES, CA 90049</td>
<td>95-4029756</td>
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<td>(7) CHABAD OF GLENDALE AND THE FOOTHILL COMM.</td>
<td>439 W. KENNETH RD. GLENDALE, CA 91202</td>
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<td>(8) CHABAD OF IRVINE</td>
<td>5010 BARBANC Family IRVINE, CA 92604</td>
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<td>(9) CHABAD OF NORTH BEVERLY HILLS</td>
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<td>(10) CHABAD OF PACIFIC PALISADES INC.</td>
<td>17315 SUNSET BLVD. PACIFIC PALISADES, CA 90272</td>
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<td>(11) CHABAD OF PASADENA INC.</td>
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<td>(12) CHABAD OF THE CONEJO INC.</td>
<td>2524 TOWNSGATE RD WESTLAKE VILLAGE CA 91361</td>
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</table>

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3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [X] Yes  
   - [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
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<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

**Go to www.irs.gov/Form990 for the latest information.**

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**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
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<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>1</td>
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<td>CITIZENS' CLIMATE EDUCATION CORP.</td>
<td>26-2948811</td>
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Schedule I (Form 990) (2018)
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**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes ❑ No ❑

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>1 (b) EIN</th>
<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
<th>1 (e) Amount of non-cash assistance</th>
<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of non-cash assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

Part I

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   X Yes   No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) (2018)
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## SCHEDULE I (Form 990) (2018)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [x]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...............................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................................................
**SCHEDULE I**
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH
FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

---

**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th></th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>1(b) EIN</th>
<th>1(c) IRC section (if applicable)</th>
<th>1(d) Amount of cash grant</th>
<th>1(e) Amount of non-cash assistance</th>
<th>1(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1(g) Description of non-cash assistance</th>
<th>1(h) Purpose of grant or assistance</th>
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<td>95-4725924</td>
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<td>DIA CENTER FOR THE ARTS INC.</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH
FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 

   Yes [X]  No [ ]

Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN (f)</th>
<th>IRC section (g)</th>
<th>Amount of cash (d)</th>
<th>Amount of non-cash assistance (e)</th>
<th>Method of valuation (book, FMV, appraisal, other) (f)</th>
<th>Description of noncash assistance (h)</th>
<th>Purpose of grant or assistance (i)</th>
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<tr>
<td>(1) DWIGHT MORROW HIGH SCHOOL ALUMNI EDUC ALL.</td>
<td>20-5564581</td>
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<td>250,000</td>
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<td>(2) DYSTONIA MEDICAL RESEARCH FOUNDATION</td>
<td>95-3378526</td>
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<td>5,100</td>
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<tr>
<td>1 EAST WACKER DR STE 1730 CHICAGO, IL 60601</td>
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<td>(3) EARTH ISLAND INSTITUTE INC.</td>
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<td>2150 ALLSTON WAY STE 460 BERKELEY, CA 94704</td>
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<td>(4) EAST LOS ANGELES WOMEN'S CENTER</td>
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<td>1431 S ATLANTIC BLVD LOS ANGELES, CA 90022</td>
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<td>(5) ECHOING GREEN FOUNDATION</td>
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<td>462 SEVENTH AVE 13TH FL NEW YORK, NY 10018</td>
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<td>16134 WYANOOTTE ST. VAN NUYS, CA 91406</td>
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<td>(8) EIDEN INC.</td>
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<td>18300 TARZANA DR. TARZANA, CA 91356</td>
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<td>829 ST. CHARLES AVE. NEW ORLEANS, LA 70130</td>
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<td>(12) EQUAL JUSTICE INITIATIVE</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. .................................................................

3. Enter total number of other organizations listed in the line 1 table. .................................................................

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

Schedule I (Form 990) (2018)
# SCHEDULE I
(Form 990)

## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to www.irs.gov/Form990 for the latest information.

Name of the organization: **JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES**  
Employer identification number: **95-6111928**

### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) EQUALITY NOW, INC. 125 MAIDEN LANE, 9TH FL NEW YORK, NY 10038 13-3660566 501(C)(3)</td>
<td>7,500.</td>
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<tr>
<td>(2) ESALEN INSTITUTE 55000 HIGHWAY ONE BIG SUR, CA 93920 94-6114235 501(C)(3)</td>
<td>10,100.</td>
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<tr>
<td>(3) ETTA AKA ETTA ISRAEL CENTER 13034 SATICOY ST NORTH HOLLYWOOD, CA 91605 95-4308644 501(C)(3)</td>
<td>163,800.</td>
<td>GENERAL SUPPORT</td>
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<td>(4) EVA LEAH GUNTHER FDN FOR EDUCATION, INC. 1660 BUSH ST STE 300 SAN FRANCISCO CA 94109 94-3290824 501(C)(3)</td>
<td>100,000.</td>
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<td>(5) EVERY MOTHER COUNTS 180 VARICK ST., #1116 NEW YORK, NY 10014 45-4102644 501(C)(3)</td>
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<td>(6) EVERYCHILD FOUNDATION PO BOX 1808 PACIFIC PALISADES, CA 90272 31-1693985 501(C)(3)</td>
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<td>(7) EXCEPTIONAL CHILDREN’S FOUNDATION 5350 MACHADO ROAD CULVER CITY, CA 90230 95-1690988 501(C)(3)</td>
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<td>(8) EXECUTIVE SERVICE CORPS OF SOUTHERN CA 1000 ALAMEDA ST., STE 330 LA, CA 90012 95-3510781 501(C)(3)</td>
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<td>(9) EZRA LATALMID 343 N. DETROIT AVE. LOS ANGELES, CA 90036 95-4623012 501(C)(3)</td>
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<td>(10) EZRAT ISRAEL 806 EASTERN PKWY. BROOKLYN, NY 11213 11-3637996 501(C)(3)</td>
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<td>(11) FEEDING AMERICA P.O. BOX 96749 WASHINGTON, DC 20090 36-3673599 501(C)(3)</td>
<td>6,900.</td>
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<td>(12) FIBERSHED P.O. BOX 221 SAN GERONIMO, CA 94963 45-3055196 501(C)(3)</td>
<td>25,000.</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(9) FOUNDATION FOR STUDENT COMMUNICATION INC</td>
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<td>(12) FRANKIE LEMMON FOUNDATION</td>
<td>56-1572087</td>
<td>501(c)(3)</td>
<td>25,000.</td>
<td></td>
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<td>GENERAL SUPPORT</td>
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</tbody>
</table>

**Notes:**

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I (Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. 

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

---

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   Yes [ ]  No [X]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FRIENDS AROUND DBA FRIENDSHIP CIRCLE OF LA 1952 S ROBERTSON BLVD LOS ANGELES, CA 90034</td>
<td>20-3270890</td>
<td>501(c)(3)</td>
<td>95,470.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>2</td>
<td>FRIENDS OF CULTURAL CENTER 73000 FRED WARING DR PALM DESERT, CA 92260</td>
<td>95-2834871</td>
<td>501(c)(3)</td>
<td>5,200.</td>
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<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>3</td>
<td>FRIENDS OF LARC 29850 BOUQUET CANYON SAUGUS, CA 91350</td>
<td>95-3738738</td>
<td>501(c)(3)</td>
<td>15,800.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>4</td>
<td>FRIENDS OF THE BRISKER YESHIVA INC. 38 SADDLE RIVER RD. MONSEY, NY 10952</td>
<td>23-7181650</td>
<td>501(c)(3)</td>
<td>178,000.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>5</td>
<td>FRIENDS OF THE HIGH LINE INC. P.O. BOX 30968 NEW YORK, NY 10011</td>
<td>31-1734086</td>
<td>501(c)(3)</td>
<td>25,500.</td>
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<td>6</td>
<td>FUENTE LATINA INC. 1125 NE 125 ST #300-3 NORTH MIAMI, FL 33161</td>
<td>47-1624899</td>
<td>501(c)(3)</td>
<td>40,000.</td>
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<tr>
<td>7</td>
<td>GARDEN CONSERVANCY, INC. P.O. BOX 628 GARRISON, NY 10524</td>
<td>13-3570145</td>
<td>501(c)(3)</td>
<td>29,500.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>8</td>
<td>GEFFEN PLAYHOUSE, INC. 10886 LE CONTE AVENUE LOS ANGELES, CA 90024</td>
<td>85-4492653</td>
<td>501(c)(3)</td>
<td>23,100.</td>
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<tr>
<td>9</td>
<td>GEMACH ZICRON MOSHE INC. 130 THE CIRCLE PASAIC, NJ 07055</td>
<td>22-3692274</td>
<td>501(c)(3)</td>
<td>10,000.</td>
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<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>10</td>
<td>GEMILAS CHESED CHASDEI YITZCHOK 5109 18TH AVE. BROOKLYN, NY 11204</td>
<td>11-2687367</td>
<td>501(c)(3)</td>
<td>20,000.</td>
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<tr>
<td>11</td>
<td>GEMILAS CHESED INC. 6 MEADOW LANE MONSEY, NY 10952</td>
<td>13-3570894</td>
<td>501(c)(3)</td>
<td>5,500.</td>
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<td>12</td>
<td>GEORGE W. BUSH FOUNDATION 2943 SMU BLVD. DALLAS, TX 75205</td>
<td>20-4119317</td>
<td>501(c)(3)</td>
<td>50,000.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes**  
   - **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

## Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<td>JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES</td>
<td>95-6111928</td>
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</table>

### Part II Table

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>GETTY HOUSE FOUNDATION 605 S IRVING BLVD, LOS ANGELES, CA 90005</td>
<td>95-4456499</td>
<td>501(c)(3)</td>
<td>10,000.</td>
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<td>GENERAL SUPPORT</td>
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</tr>
<tr>
<td>GINDI MAIMONIDES ACADEMY 8511 BEVERLY PLACE LOS ANGELES, CA 90048</td>
<td>95-3214146</td>
<td>501(c)(3)</td>
<td>805,770.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>GIVING SPIRIT 11693 SAN VICENTE BLVD #133 LA, CA 90049</td>
<td>61-1405121</td>
<td>501(c)(3)</td>
<td>16,350.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>GLSEN INC. 110 WILLIAM ST 30TH FL. NEW YORK, NY 10038</td>
<td>04-3234202</td>
<td>501(c)(3)</td>
<td>5,300.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>GOOD PEOPLE FUND INC. 384 WYOMING AVE. MILLBURN, NJ 07041-2127</td>
<td>26-1887249</td>
<td>501(c)(3)</td>
<td>139,360.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>GRAMEEN AMERICA INC 150 W. 30TH ST; 8TH FL NEW YORK, NY 10001</td>
<td>20-8497991</td>
<td>501(c)(3)</td>
<td>60,000.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>GREEN DOT PUBLIC SCHOOLS 1149 S. HILL ST., 600 LOS ANGELES, CA 90015</td>
<td>95-4679811</td>
<td>501(c)(3)</td>
<td>15,000.</td>
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<tr>
<td>GROUP CONSCIENCE AKA PEMARRO 1482 KINGS VILLA RD. RAMONA, CA 92065</td>
<td>33-0106223</td>
<td>501(c)(3)</td>
<td>7,500.</td>
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<tr>
<td>HACHNASAS KALLAH OF GREATER LOS ANGELES INC 200 S. MCCADEN PL. LOS ANGELES, CA 90004</td>
<td>95-4550742</td>
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<td>22,250.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>HALACHIC EDUCATION CENTER CORP. 254 CHESTNUT ST. ENGLEWOOD, NJ 07631</td>
<td>45-5237529</td>
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<td>12,200.</td>
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<tr>
<td>HAPPY MINYAN PO BOX 16002 BEVERLY HILLS, CA 90209</td>
<td>95-4668184</td>
<td>501(c)(3)</td>
<td>14,760.</td>
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<tr>
<td>HARKHAM-GAON ACADEMY 5870 W. OLYMPIC BLVD. LOS ANGELES, CA 90036</td>
<td>47-5041293</td>
<td>501(c)(3)</td>
<td>22,320.</td>
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<td>GENERAL SUPPORT</td>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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**Part I**

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
<th>2(b) EIN</th>
<th>3(c) IRC section (if applicable)</th>
<th>4(d) Amount of cash grant</th>
<th>5(e) Amount of non-cash assistance</th>
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<th>7(g) Description of noncash assistance</th>
<th>8(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HARMONY PROJECT</td>
<td>95-4856236</td>
<td>501(c)(3)</td>
<td>311,000</td>
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<td>HAROLD GRINSPoon FOUNDATION</td>
<td>06-6685725</td>
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<tr>
<td>HAROLD ROBINSON FOUNDATION</td>
<td>26-4807035</td>
<td>501(c)(3)</td>
<td>19,000</td>
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<tr>
<td>HARVARD–WESTLAKE SCHOOL</td>
<td>95-1644019</td>
<td>501(c)(3)</td>
<td>68,000</td>
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<tr>
<td>HASBARA FELLOWSHIPS</td>
<td>20-1651102</td>
<td>501(c)(3)</td>
<td>10,180</td>
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<td>HAzON INC.</td>
<td>13-1623922</td>
<td>501(c)(3)</td>
<td>10,000</td>
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<tr>
<td>HEADSTRONG PROJECT INC.</td>
<td>45-5261907</td>
<td>501(c)(3)</td>
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<td>HEART OF LOS ANGELES YOUTH, INC.</td>
<td>95-4397418</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>HEBREW ACADEMY OF LONG BEACH</td>
<td>11-1892079</td>
<td>501(c)(3)</td>
<td>54,000</td>
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<tr>
<td>HEBREW UNION COLL.—JEWISH INSTIT. OF RELIG.</td>
<td>31-0537067</td>
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<td>2,097,959</td>
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<tr>
<td>HERITAGE RETREATS INC.</td>
<td>95-4892649</td>
<td>501(c)(3)</td>
<td>25,000</td>
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<td>GENERAL SUPPORT</td>
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<td>HESKA AMUNA SYNAGOGUE</td>
<td>62-6011748</td>
<td>501(c)(3)</td>
<td>25,000</td>
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<td>GENERAL SUPPORT</td>
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</tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### SCHEDULE I (Form 990)

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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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**Part I: General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIAS, INC. 1300 SPRING ST # 500 SILVER SPRING MD 20910</td>
<td>13-5633307</td>
<td>501(C)(3)</td>
<td>116,640.</td>
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<td>HIDE AND SEEK FOUNDATION 6475 E PAC COAST HWY LONG BEACH CA 90803</td>
<td>95-4733266</td>
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<td>21,500.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>HILLEL 818 NORTHRIDGE - HILLEL FDN 17729 PLUMMER ST. NORTHRIDGE, CA 91325</td>
<td>46-0893850</td>
<td>501(C)(3)</td>
<td>121,016.</td>
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<tr>
<td>HILLEL AT PRINCETON 70 WASHINGTON RD. PRINCETON, NJ 08540</td>
<td>22-6071127</td>
<td>501(C)(3)</td>
<td>50,850.</td>
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<tr>
<td>HILLEL AT STANFORD-CTR FOR JEWISH CAMPUS LF P.O. BOX 20526 STANFORD, CA 94309</td>
<td>77-0492512</td>
<td>501(C)(3)</td>
<td>6,800.</td>
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<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>HILLEL AT UCLA 574 HILGARO AVE. LOS ANGELES, CA 90024</td>
<td>46-0573247</td>
<td>501(C)(3)</td>
<td>293,126.</td>
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<tr>
<td>HILLEL AT UNIV OF SOUTHERN CA; HILLEL FDN 3300 S. HOOVER ST. LOS ANGELES, CA 90007</td>
<td>95-4867366</td>
<td>501(C)(3)</td>
<td>20,250.</td>
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<td>GENERAL SUPPORT</td>
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<td>HILLEL AT UNIVERSITY OF CHICAGO 30 S. WELLS ST. CHICAGO, IL 60606</td>
<td>36-2167761</td>
<td>501(C)(3)</td>
<td>6,800.</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>HILLEL HEBREW ACADEMY 9120 W OLYMPIC BLVD BEVERLY HILLS, CA 90212</td>
<td>95-1662972</td>
<td>501(C)(3)</td>
<td>238,220.</td>
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<tr>
<td>HILLEL: THE FDN FOR JEWISH CAMPUS LIFE 800 8TH ST. NW WASHINGTON, DC 20001-3724</td>
<td>52-1844823</td>
<td>501(C)(3)</td>
<td>306,400.</td>
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<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>HOLY YESHIVAH &amp; TALMUD TORAH TORATH EMETH 1615 CARROLL ST BROOKLYN, NY 11213</td>
<td>13-5619651</td>
<td>501(C)(3)</td>
<td>7,500.</td>
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<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>HOMEBOY INDUSTRIES 130 W. BRUNO ST. LOS ANGELES, CA 90012</td>
<td>95-4800735</td>
<td>501(C)(3)</td>
<td>92,750.</td>
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<td></td>
<td>GENERAL SUPPORT</td>
</tr>
</tbody>
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   - Yes [x]  
   - No  

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
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<tr>
<td>HONEymoon ISRAEL FOUNDATION INC.</td>
<td>47-1291052</td>
<td>501(c)(3)</td>
<td>60,200</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **X Yes  No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1  (a) Name and address of organization or government</th>
<th>2  (b) EIN</th>
<th>3  (c) IRC section (if applicable)</th>
<th>4  (d) Amount of cash grant</th>
<th>5  (e) Amount of non-cash assistance</th>
<th>6  (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7  (g) Description of noncash assistance</th>
<th>8  (h) Purpose of grant or assistance</th>
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<tr>
<td>IMAGINATION PRODUCTIONS INC D/B/A JERUSALEM U</td>
<td>26-1264680</td>
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<td>11110 W OAKLAND PARK BLVD SUNRISE, FL 33351</td>
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<td>INSIGHT SEMINARS INC.</td>
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<td>INSTITUTE FOR MYELOMA AND BONE CANCER RSCH</td>
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<td>INSTITUTE OF CLASSICAL ARCHITECTURE &amp; ART</td>
<td>13-3872803</td>
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<td>4915 1-55 NORTH STE 100 A JACKSON, MS 39206</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...............................................................................................................

3. Enter total number of other organizations listed in the line 1 table .................................................................................................................................
### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1(a) Name and address of organization or government</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>ISRAEL POLICY FORUM INC. 355 LEXINGTON AVE 14TH FL NEW YORK NY 10017 90-0653286 501(C)(3)</td>
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<td>J STREET EDUCATION FUND, INC. 601 VINE ST., 6TH FL. LOS ANGELES, CA 90028 20-2777557 501(C)(3)</td>
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<td>J. PAUL GETTY TRUST 1200 GETTY CENTER DR., #400 LA, CA 90049 85-1790021 501(C)(3)</td>
<td>16,000.</td>
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<td>J.E.T.S. SYNAGOGUE 16601 RINALDI ST. GRANADA HILLS, CA 91344 68-0500418 501(C)(3)</td>
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<td>JDRF INTERNAT-JUVENILE DIABETES RRCH FDN 811 WILSHIRE BLVD #1600 LA, CA 90017 23-1907729 501(C)(3)</td>
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<td>JEP CONGREGATIONS OF LONG ISLAND 340 S. HAUSER BLVD., #217 LA, CA 90036 11-3149111 501(C)(3)</td>
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</table>

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**Part I | General Information on Grants and Assistance**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) JEWISH ACADEMY OF LOS ANGELES</td>
<td>15915 VENTURA BLVD., PH2 ENCINO, CA 91436</td>
<td>95-1644595</td>
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<td>(2) JEWISH BIG BROTHERS BIG SISTERS ASSOC OF LA</td>
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<td>95-1691009</td>
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<td>(3) JEWISH CAMPUS ACTIVITIES BOARD, PENN HILLEL</td>
<td>215 SOUTH 39TH ST. PHILADELPHIA, PA 19104</td>
<td>22-1365179</td>
<td>501(c)(3)</td>
<td>58,650.</td>
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<td>(4) JEWISH CENTER FOR JUSTICE</td>
<td>11960 SUNSET BLVD. LOS ANGELES, CA 90049</td>
<td>81-4397882</td>
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<td>(5) JEWISH CHILDREN'S ADOPTION NETWORK</td>
<td>P.O. BOX 237 BROOKLANDVILLE, MD 21022</td>
<td>84-1145552</td>
<td>501(c)(3)</td>
<td>27,000.</td>
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<td>(6) JEWISH COMMUNITY CENTER OF HOUSTON</td>
<td>5601 S. BRAESWOOD HOUSTON, TX 77096</td>
<td>74-1198298</td>
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<td>7,500.</td>
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<td>(7) JEWISH COMMUNITY FREE CLINIC</td>
<td>50 MONTGOMERY DR. SANTA ROSA, CA 95404</td>
<td>94-3386103</td>
<td>501(c)(3)</td>
<td>6,000.</td>
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<td>(8) JEWISH FAMILY SERVICE OF LOS ANGELES</td>
<td>3580 WILSHIRE BLVD., #700 LA, CA 90010</td>
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<td>(9) JEWISH FED GRTR SAN GABRIEL &amp; POMONA VALLEY</td>
<td>114A W. LIME AVE. MONROVIA, CA 91016</td>
<td>95-4443373</td>
<td>501(c)(3)</td>
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<td>(10) JEWISH FED. OF PALM SPRINGS AND DESERT AREA</td>
<td>69-710 HIGHWAY 111 RANCHO MIRAGE, CA 92270</td>
<td>23-7211881</td>
<td>501(c)(3)</td>
<td>28,000.</td>
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<td>(11) JEWISH FEDERATION OF GREATER LOS ANGELES</td>
<td>6505 WILSHIRE BLVD. LOS ANGELES, CA 90048</td>
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<td>(12) JEWISH FEDERATION OF GREATER PITTSBURGH</td>
<td>234 MCKEE PL. PITTSBURGH, PA 15213</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

3. Enter total number of other organizations listed in the line 1 table...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I | General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Part II | Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
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<th>(c) IRC section</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................  

3. Enter total number of other organizations listed in the line 1 table ......................................................................................................................
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

**Attach to Form 990.**

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) JEWISH WOMEN'S THEATRE</td>
<td>3435 OCEAN PARK SANTA MONICA, CA 90405-3301</td>
<td>47-4157779</td>
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<td>(2) JEWISH WORLD WATCH</td>
<td>5551 BALBOA BLVD. ENCINO, CA 91316</td>
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<td>(3) JEWS FOR JUDAISM INTERNATIONAL INC.</td>
<td>P.O. BOX 351235 LOS ANGELES, CA 90035</td>
<td>95-4040781</td>
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<td>(4) JOE TORRE SAFE AT HOME FOUNDATION</td>
<td>PO BOX 1037 MIDTOWN ST NEW YORK, NY 10018</td>
<td>03-0442514</td>
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<td>(5) JOHN WAYNE CANCER INSTITUTE</td>
<td>2200 SANTA MONICA BLVD SANTA MONICA CA90404</td>
<td>95-4291515</td>
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<td>(6) JONNSON CANCER CENTER FOUNDATION - UCLA</td>
<td>8-950 FACTOR BLDG BOX 951780 LA, CA 90095</td>
<td>95-2242757</td>
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<td>(7) JQ INTERNATIONAL INC.</td>
<td>801 LARRABEE ST, WEST HOLLYWOOD, CA 90069</td>
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<td>(8) JR EL TOUR INC</td>
<td>3945 E PARADISE FALLS DR TUCSON, AZ 85712</td>
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<td>(9) JUDAISM &amp; DEMOCRACY ACTION ALL. OF NO. AM.</td>
<td>364 WEST 117TH ST, #4C NEW YORK, NY 10026</td>
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<td>(11) KATAHDIN PRODUCTIONS INC.</td>
<td>P.O. BOX 2218 BERKELEY, CA 94702</td>
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<tr>
<td>(12) KAUAI COMMUNITY HEALTH ALLIANCE</td>
<td>2460 OKA ST. KILAUEA, HI 96754</td>
<td>87-0813060</td>
<td>501(C)(3)</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes [X]  No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
<tr>
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<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<tr>
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<td>KEEP MEMORY ALIVE 888 W. BONNEVILLE AVE. LAS VEGAS, NV 89106</td>
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<td>KEHILLAS WESTGATE INC. 11 WELLINGTON LN. LAKEWOOD, NJ 08701</td>
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<td>KEREN METSUDAH 960 E. 27TH ST. BROOKLYN, NY 11210</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table
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(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

### Part I
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>S. No.</th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

---

### Part I: General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

### Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1. LOS ANGELES OPERA COMPANY</td>
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<td>8. M F PLACE INC. DBA MY FRIEND’S PLACE</td>
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<td>12. MALIBU JEWISH CENTER &amp; SYNAGOGUE</td>
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</table>

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## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

### Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - **Yes** [X]  
   - **No**  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(h) Purpose of grant or assistance</th>
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<td>(1) MANHATTAN BEACH EDUCATION FOUNDATION</td>
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<td>(7) MARTY HENNESSY INSPIRING CHILDREN FDN</td>
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<td>PO BOX 60953 BOULDER CITY, NY 89006</td>
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<td>(12) MECHON LHOROA</td>
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</tbody>
</table>

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**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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   - No [ ]

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<th>Purpose of grant or assistance</th>
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<td>1.</td>
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<td>205 WEST BECH STREET LONG BEACH, NY 11561</td>
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<td>10.</td>
<td>METROPOLITAN MUSEUM OF ART</td>
<td>1000 5TH AVE. NEW YORK, NY 10028</td>
<td>13-1624086</td>
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<td>11.</td>
<td>MIDRASH OD YOSEF HAI</td>
<td>P.O. BOX 48585 LOS ANGELES, CA 90048</td>
<td>95-3312783</td>
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<td>14,800</td>
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<td>12.</td>
<td>MIDWEST CAMPSERS INC.</td>
<td>2463 S GREEN RD. CLEVELAND, OH 44122</td>
<td>36-0897622</td>
<td>501(c)(3)</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................. .................................................. ...............

3. Enter total number of other organizations listed in the line 1 table .............................................................
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

**Part I**  General Information on Grants and Assistance

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**  

   - Yes [x]  
   - No      

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

**Part II**  Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>15800 ZELDIN'S WAY LOS ANGELES, CA 90049</td>
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<tr>
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<td>441 SAXONY ROAD, BARN 2 ENCINITAS, CA 92024</td>
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<tr>
<td>P.O. BOX 0291 MENLO PARK, CA 94026</td>
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<td>16,500.</td>
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<td>23388 MULHOLLAND DR, WOODLAND HILLS, CA 91364</td>
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</table>

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3. **Enter total number of other organizations listed in the line 1 table.**  

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

Schedule I (Form 990) (2018)
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

**Part I** General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✔️ Yes ☐ No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<thead>
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<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td><strong>MOUNT SINAI HEALTH SYSTEM INC.</strong></td>
<td>1 GUSTAV L. LEVY PLACE NEW YORK, NY 10029</td>
<td>46-4248304</td>
<td>501(C)(3)</td>
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<td><strong>MOUNT SINAI MEDICAL CENTER INC.</strong></td>
<td>1 GUSTAVE L. LEVY PL NEW YORK, NY 10029</td>
<td>13-6271888</td>
<td>501(C)(3)</td>
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<td><strong>MOUNT ST. MARY’S COLLEGE</strong></td>
<td>10 CHESTER PL. LOS ANGELES, CA 90007</td>
<td>95-1641455</td>
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<td><strong>MOVING TRADITIONS</strong></td>
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<td>34-2015014</td>
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<td>111,500.</td>
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<td><strong>MOXI THE WOLF MUSEUM OF EXPLORATION + INNOV</strong></td>
<td>125 STATE STREET SANTA BARBARA, CA 93101</td>
<td>77-0252722</td>
<td>501(C)(3)</td>
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<td><strong>MR. HOLLAND’S OPUS FOUNDATION INC.</strong></td>
<td>4370 TUJUNGA AVE #330 STUDIO CITY, CA 91604</td>
<td>95-4604927</td>
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<td>95-3433820</td>
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<td><strong>MUSIC ASSOCIATES OF ASPEN INC.</strong></td>
<td>225 MUSIC SCHOOL ROAD ASPEN, CO 81611</td>
<td>84-0445087</td>
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<td><strong>MVAT A NONPROFIT CORPORATION</strong></td>
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<td>27-0222812</td>
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<td><strong>NACHSHON MINYAN A CA NONPROFIT RELIG. CORP</strong></td>
<td>4924 BALBOA BLVD #423 ENCINO, CA 91316</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ...........................................

3. Enter total number of other organizations listed in the line 1 table ...........................................

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part I - General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   Yes [X]  No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

<table>
<thead>
<tr>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>(1) NATIONAL YOUNG FARMERS COALITION AKA NYFC</td>
<td>47-2072946</td>
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<td>(4) NER ISRAEL RABBINICAL COLLEGE INC.</td>
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<td>(10) NEW WEST SYMPHONY ASSOCIATION</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

### Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
<td>NOAM HATALMUD</td>
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<td>4</td>
<td>OCEAN PARK COMM. CTR DBA THE PEOPLE CONCERN</td>
<td>95-6143865</td>
<td>501(C)(3)</td>
<td>6,000.</td>
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<td>5</td>
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<td>9</td>
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<td>13-2981115</td>
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<td>13,000.</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  
**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  
**Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>95-2217011</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

3. Enter total number of other organizations listed in the line 1 table .........................................................................................................................
## General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - [x] Yes  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name and address of organization or government</th>
<th>(b) EIN</th>
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<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>1</td>
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<td>91-2129319</td>
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<td>45-5548680</td>
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<td>29,150.</td>
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<td>501(C)(3)</td>
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<td>04-2103580</td>
<td>501(C)(3)</td>
<td>590,750.</td>
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<td>PREVENT CHILD ABUSE AMERICA</td>
<td>23-7235671</td>
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<tr>
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<td>PRIDE BOOSTER CLUB INC PAUL REVERE MS</td>
<td>95-3815710</td>
<td>501(C)(3)</td>
<td>10,000.</td>
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<td>GENERAL SUPPORT</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table...

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1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
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2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>
| 1. PROJECT MIRACLE  
   9301 WILSHIRE BLVD STE 507 BH CA 90210  
   27-4030539  
   501(C)(3)  
   $45,600.  
   GENERAL SUPPORT |
| 2. PROMOTING WELLNESS FOUNDATION  
   2127 HIGHLAND RD. ANN ARBOR, MI 48104  
   45-4699381  
   501(C)(3)  
   $10,000.  
   GENERAL SUPPORT |
| 3. PROSTATE CANCER FOUNDATION  
   1250 4TH ST. SANTA MONICA, CA 90401  
   95-4418411  
   501(C)(3)  
   $7,850.  
   GENERAL SUPPORT |
| 4. PROTEUS FUND INC.  
   15 RESEARCH DR., #B AMHERST, MA 01002  
   04-3243004  
   501(C)(3)  
   $15,000.  
   GENERAL SUPPORT |
| 5. PROVIDENCE HEALTH & SERVICES FOUNDATION  
   18321 CLARK ST. TARKANA, CA 91356  
   95-3544877  
   501(C)(3)  
   $12,500.  
   GENERAL SUPPORT |
| 6. PROVIDENCE HEBREW DAY SCHOOL  
   450 ELMGROVE AVE. PROVIDENCE, RI 02906  
   05-0271953  
   501(C)(3)  
   $9,500.  
   GENERAL SUPPORT |
| 7. PSHIP FOR NEW AMERICAN ECONOMY RSRCH FUND  
   989 3RD AVE. NEW YORK, NY 10022  
   32-0325450  
   501(C)(3)  
   $25,000.  
   GENERAL SUPPORT |
| 8. PUBLIC COUNSEL  
   610 S. ARDMORE AVE. LOS ANGELES, CA 90005  
   23-7105149  
   501(C)(3)  
   $14,600.  
   GENERAL SUPPORT |
| 9. PUBLIC HEALTH INSTITUTE  
   555 12TH ST., 10TH FL. OAKLAND, CA 94607  
   94-1646278  
   501(C)(3)  
   $6,150.  
   GENERAL SUPPORT |
| 10. PUEBLO NUEVO EDUCATION & DEVELOPMENT GROUP  
   3435 W. TEMPLE ST. LOS ANGELES, CA 90026  
   81-1668428  
   501(C)(3)  
   $10,000.  
   GENERAL SUPPORT |
| 11. QUEENS COLLEGE FOUNDATION INC.  
   65-30 KISSENA BLVD. FLUSHING, NY 11367  
   11-6080521  
   501(C)(3)  
   $12,500.  
   GENERAL SUPPORT |
| 12. RANCH AT BETHEL  
   4405 HIGHLAND AVE. BROOKLYN, NY 11224  
   81-0727220  
   501(C)(3)  
   $10,000.  
   GENERAL SUPPORT |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization
JEWISH COMMUNITY FOUNDATION OF THE JEWISH
FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number
95-6111928

Part I
General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
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<th>(a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tr>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2018)
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   - Yes [x]  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>Name and address of organization or government</th>
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<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
<th>Purpose of grant or assistance</th>
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<td>SAMUEL A. FRYER YAVNEH ACADEMY</td>
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<td>SAN FERNANDO VALLEY HEBREW HIGH SCHOOL</td>
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<td>SHALHEVET HIGH SCHOOL</td>
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<td>256,910.</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

### Name of the organization
JEWISH COMMUNITY FOUNDATION OF THE JEWISH
FEDERATION COUNCIL OF GREATER LOS ANGELES

### Employer identification number
95-6111928

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - [ ] Yes
   - [x] No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(h) Purpose of grant or assistance</th>
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<tr>
<td>(1) SHALOM HARTMAN INSTITUTE OF NORTH AMERICA 475 RIVERSIDE DR., #1450 NEW YORK, NY 10115 13-3014387 501(C)(3)</td>
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<td>(3) SHARE OUR STRENGTH INC. P.O. BOX 75473 BALTIMORE, MD 21275-5475 52-1367538 501(C)(3)</td>
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<td>(4) SHARE, INC. P.O. BOX 1342 BEVERLY HILLS, CA 90213 95-6097401 501(C)(3)</td>
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3. Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**SCHEDULE I**  
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES  
Employer identification number: 95-6111928

---

**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

---

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>13-3661416</td>
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<td>SMITHSONIAN INSTITUTION PO BOX 9039 FITTSTFIELD, MA 01202-9039</td>
<td>53-0206027</td>
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<td>95-3271971</td>
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<td>6</td>
<td>SOUTH CENTRAL LOS ANGELES MINISTRY PROJECT 892 E. 48TH ST. LOS ANGELES, CA 90011</td>
<td>95-4571388</td>
<td>501(c)(3)</td>
<td>11,800.</td>
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<td>7</td>
<td>SOUTHEASTERN FOUNDATION 425 W. UNIVERSITY BLVD. DURANT, OK 74701</td>
<td>73-0765384</td>
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<td>8</td>
<td>SOUTHERN CALIFORNIA COUNSELING CENTER 5615 WEST PICO BLVD. LOS ANGELES, CA 90019</td>
<td>95-2430665</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.**

**Attach to Form 990.**

**Go to www.irs.gov/Form990 for the latest information.**

**Schedule I (Form 990)**

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  

   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
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<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................. ►

3. Enter total number of other organizations listed in the line 1 table .................................................. ►

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

Schedule I (Form 990) (2018)
### SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

[Attach to Form 990.](#)

[Go to www.irs.gov/Form990 for the latest information.](#)

---

#### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [ ]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
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<th>(b) EIN</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................................

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---

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

Schedule I (Form 990) (2018)

JSA
8E1288 1.000

76835X 2020

PAGE 103
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization: JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

Employer identification number: 95-6111928

---

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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### Grants and Other Assistance to Domestic Organizations and Domestic Governments

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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Schedule I (Form 990) (2018)
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2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes  
   - No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments.

<table>
<thead>
<tr>
<th>1</th>
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<tbody>
<tr>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section (if applicable)</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of noncash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(1) T’RUAH</td>
<td>266 W. 37TH ST., # 803 NEW YORK, NY 10018</td>
<td>45-0464545</td>
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<td>535 W. 116TH ST., #109 NEW YORK, NY 10027</td>
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<td>2 W. 70TH ST. NEW YORK, NY 10023</td>
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<td>(12) UNITED CEREBRAL PALSY SPASTIC CHILDREN'S FDN</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

#### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attachment to Form 990.  

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No 

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>221 REGENT DR. LAKEWOOD, NJ 08701</td>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  
3. Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

---

#### Part I

**General Information on Grants and Assistance**

1. **Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**
   - Yes
   - No

2. **Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
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<tr>
<th>1 (a) Name and address of organization or government</th>
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<th>1 (c) IRC section (if applicable)</th>
<th>1 (d) Amount of cash grant</th>
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<th>1 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>1 (g) Description of noncash assistance</th>
<th>1 (h) Purpose of grant or assistance</th>
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<td>(1) VENICE FAMILY CLINIC 604 ROSE AVE. VENICE, CA 90291 95-2769432</td>
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<td>(2) VENTURA COUNTY COMMUNITY FOUNDATION 4001 MISSION OAKS BLVD CAMARILLO, CA 93012 77-0165029</td>
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<td>(3) VIETNAMESE BUDDHIST MEDITATION CONGREG. INC 6326 CAMINO DEL REY BONSALL, CA 92303 33-0952480</td>
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<tr>
<td>(4) VILLAGE FOR VETS 149 S. BARRINGTON AVE STE 640 LA, CA 90049</td>
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<td>GENERAL SUPPORT</td>
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<tr>
<td>(5) VIP COMMUNITY MENTAL HEALTH CENTER INC. 1721 GRIFFIN AVE. LOS ANGELES, CA 90031</td>
<td>30-0017808</td>
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<td>47-1075497</td>
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<td>(7) VISTA DEL MAR CHILD AND FAMILY SERVICES 3200 MOTOR AVE. LOS ANGELES, CA 90034</td>
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<td>(8) VOICES OF SEPTEMBER 11 INC. 80 MAIN ST., #5 NEW CANAAN, CT 06840</td>
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<td>(9) VOTER PARTICIPATION CENTER 1707 L ST NW STR 750 WASHINGTON, DC 20036</td>
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<td>(10) WALLIS ANNENBERG CENTER FOR PERFORMING ARTS 9390 N. SANTA MONICA BLVD. BH, CA 90210</td>
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<td>(11) WASHINGTON INSTITUTE FOR NEAR EAST POLICY 1111 19TH ST NW, #500 WASHINGTON, DC 20036</td>
<td>52-1376034</td>
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<td>(12) WATER BUFFALO CLUB 16030 VENTURA BLVD 5TH FL. ENCINO, CA 91436</td>
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<td>501(c)(3)</td>
<td>9,300.</td>
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<td>GENERAL SUPPORT</td>
</tr>
</tbody>
</table>

---

2. **Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.**

3. **Enter total number of other organizations listed in the line 1 table.**

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

---

Schedule I (Form 990) (2018)
**SCHEDULE I**

**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Open to Public Inspection

Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury
Internal Revenue Service

**Name of the organization**

FEDERATION COUNCIL OF GREATER LOS ANGELES

**Employer identification number**

95-6111928

### General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes □ No □

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
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<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
## SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

---

### Part I  General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II  Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td>65-1172303</td>
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</tbody>
</table>

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**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Attach to Form 990.

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Name of the organization: **JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES**

Employer identification number: **95-6111928**

---

**Part I**

General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   
   **X** Yes  
   
   **No**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II**

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
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</table>
| 1 | YESHIVA GEDOLAH OF DETROIT  
24711 RADCLIFT OAK PARK, MI 48237 | 38-2569760 | 501(C)(3) | 25,000. | | | | GENERAL SUPPORT |
| 2 | YESHIVA GEDOLAH OF LOS ANGELES  
5444 WEST OLYMPIC BLVD LOS ANGELES CA 90036 | 95-3298317 | 501(C)(3) | 200,700. | | | | GENERAL SUPPORT |
| 3 | YESHIVA GEDOLAH OF MONMOUTH COUNTY INC.  
77 COLES WAY LAKENOX, NJ 08701 | 82-1591092 | 501(C)(3) | 6,800. | | | | GENERAL SUPPORT |
| 4 | YESHIVA GEDOLAH OF PATERSON INC.  
555 15TH AVE PATERSON, NJ 07504 | 22-3415952 | 501(C)(3) | 13,600. | | | | GENERAL SUPPORT |
| 5 | YESHIVA GEDOLAH OF RAMAPO INC.  
11 TRAILSIDE PL. NEW CITY, NY 10956 | 46-5742712 | 501(C)(3) | 12,500. | | | | GENERAL SUPPORT |
| 6 | YESHIVA HEICHAL HATORAH INC.  
3323 RICHMOND AVE. STATEN ISLAND, NY 10312 | 26-0213027 | 501(C)(3) | 19,500. | | | | GENERAL SUPPORT |
| 7 | YESHIVA KEREN ORAH  
1339 52ND ST BROOKLYN, NY 11219 | 23-7098648 | 501(C)(3) | 973,360. | | | | GENERAL SUPPORT |
| 8 | YESHIVA KETANA OF LONG ISLAND  
321 DOUGHTY BLVD. INWOOD, NY 11096 | 11-3319522 | 501(C)(3) | 10,000. | | | | GENERAL SUPPORT |
| 9 | YESHIVA KETANA OF LOS ANGELES  
12131 BURBANK BLVD VALLEY VILLAGE, CA 91607 | 45-4665043 | 501(C)(3) | 13,980. | | | | GENERAL SUPPORT |
| 10 | YESHIVA KETANA OF MANHATTAN  
346 W. 89TH ST. NEW YORK, NY 10024 | 13-3423229 | 501(C)(3) | 9,920. | | | | GENERAL SUPPORT |
| 11 | YESHIVA MACHZIKEI HADAS  
1601 42ND ST. BROOKLYN, NY 11204 | 11-2434820 | 501(C)(3) | 10,000. | | | | GENERAL SUPPORT |
| 12 | YESHIVA MARBEH TORAH  
1464 EAST 13TH STREET BROOKLYN, NY 11230 | 11-2483348 | 501(C)(3) | 37,500. | | | | GENERAL SUPPORT |

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

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<th>(d) Amount of cash grant</th>
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<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<td></td>
</tr>
</tbody>
</table>
**SCHEDULE I**
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Open to Public Inspection

**Name of the organization**
JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES

**Employer identification number**
95-6111928

### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>YEHISHIVAT HANEHEV INC. 860 W. 181ST ST., #21 NEW YORK, NY 10033</td>
<td>13-6174435</td>
<td>501(c)(3)</td>
<td>25,000.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YEHISHIVAT OHU CHANOCH INC. 1540 ROBERTSON BLVD. LOS ANGELES, CA 90035</td>
<td>27-1887722</td>
<td>501(c)(3)</td>
<td>13,800.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YEHISHIVAT TORATH EMETH ACADEMY 540 N. LA BREA AVE. LOS ANGELES, CA 90036</td>
<td>95-1962397</td>
<td>501(c)(3)</td>
<td>393,020.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YIDDISHKAYT LOS ANGELES 3780 WILSHIRE BOULEVARD, #410 LA, CA 90010</td>
<td>95-4076358</td>
<td>501(c)(3)</td>
<td>56,600.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YIVO INSTITUTE FOR JEWISH RESEARCH, INC. 15 M. 16TH STREET NEW YORK, NY 10011</td>
<td>13-1641082</td>
<td>501(c)(3)</td>
<td>50,250.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YORK COLLEGE OF PENNSYLVANIA 441 COUNTRY CLUB RD. YORK, PA 17403</td>
<td>23-1352698</td>
<td>501(c)(3)</td>
<td>40,000.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YOUNG ISRAEL OF CENTURY CITY 9317 W. PICO BLVD LOS ANGELES, CA 90035</td>
<td>95-3075173</td>
<td>501(c)(3)</td>
<td>574,680.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YOUNG ISRAEL OF N. BEVERLY HILLS 9261 ALDEN DRIVE BEVERLY HILLS, CA 90210</td>
<td>95-4394879</td>
<td>501(c)(3)</td>
<td>170,540.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YOUNG MENS &amp; YOUNG WOMENS HEBREW ASSOC 1395 LEXINGTON AVE. NEW YORK, NY 10128</td>
<td>13-1624229</td>
<td>501(c)(3)</td>
<td>15,000.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>YOUTH ENTREPRENEURS INC. 4111 E 37TH ST. N, # D101 WICHITA, KS 67220</td>
<td>48-1187886</td>
<td>501(c)(3)</td>
<td>1,000,000.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>ZERO TO THREE: NATIONAL CENTER FOR INFANTS 1255 23RD ST, NW, #350 WASHINGTON, DC 20037</td>
<td>52-1105189</td>
<td>501(c)(3)</td>
<td>25,000.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
<tr>
<td>ZIMMER CHILDREN’S MUSEUM BY SHAREWELL 395 SANTA MONICA PLACE SANT MONICA CA90401</td>
<td>20-1470992</td>
<td>501(c)(3)</td>
<td>38,630.</td>
<td></td>
<td></td>
<td></td>
<td>GENERAL SUPPORT</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .................................................. 792.

3. Enter total number of other organizations listed in the line 1 table .................................................................
### Part III  Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<tr>
<td>7</td>
<td><strong>Supplemental Information</strong></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Part IV  Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

**SCHEDULE I, PART I, LINE 2**

**DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANTS**

The majority of grants issued by the foundation are for general operations for the period of one year. When the foundation issues a multi-year grant for a specified purpose, a grant agreement is prepared between the foundation and the grantee detailing benchmarks that must be achieved by the grantee. The agreement is monitored and the grantee must show fulfillment of benchmarks with a written report.
### Part III  Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Type of grant or assistance</th>
<th>Number of recipients</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<td>3</td>
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<td>6</td>
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</tr>
</tbody>
</table>

### Part IV  Supplemental Information

Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

**SCHEDULE I, PART II**

AMOUNTS REPORTED ON PART IX, LINE 1 REPRESENT GRANTS AND CONTRIBUTIONS.

EXPENSE ACCRUED FOR GAAP PURPOSES IN THE ORGANIZATION'S BOOKS AND RECORDS. AMOUNTS REPORTED ON SCHEDULE I, PART II REPRESENT GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.
### 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 on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Housing allowance or residence for personal use
- [ ] Travel for companions
- [ ] Payments for business use of personal residence
- [ ] Tax indemnification and gross-up payments
- [ ] Health or social club dues or initiation fees
- [ ] Discretionary spending account
- [ ] Personal services (such as maid, chauffeur, chef)

**1b** If any of the boxes on line 1a are 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 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- [ ] Compensation committee
- [ ] Written employment contract
- [ ] Independent compensation consultant
- [ ] Compensation survey or study
- [ ] Form 990 of other organizations
- [ ] Approval by the board or compensation committee

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- [ ] Receive a severance payment or change-of-control payment?
- [ ] Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- [ ] 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.

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

- [ ] The organization?
- [ ] Any related organization?

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

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

- [ ] The organization?
- [ ] Any related organization?

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

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

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

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>MARVIN I. SCHOTLAND</td>
<td>(i) 427,879. 18,000. 5,573. 49,960. 12,530. 513,942. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) PRESIDENT AND CEO</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DANIEL M. ROTHBLATT</td>
<td>(i) 282,981. 15,000. 4,800. 25,250. 17,333. 345,364. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) EXECUTIVE VICE PRESIDENT</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>STEVE GAMER</td>
<td>(i) 261,007. 5,000. 0. 13,250. 8,891. 288,148. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) VICE PRESIDENT, ADVANCEMENT</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BARRY S. LITTMAN</td>
<td>(i) 210,555. 7,500. 7,200. 31,155. 25,466. 281,876. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) VICE PRESIDENT, DEVELOPMENT</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ELANA WIEN</td>
<td>(i) 172,313. 15,000. 3,600. 9,500. 11,615. 212,028. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) VP, CTR DESIGNED PHILANTHROPY</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DAVID CARROLL</td>
<td>(i) 230,566. 18,000. 0. 12,900. 18,089. 279,555. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) SR VP FIN &amp; ADMIN/CFO</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ELLEN ROSEN</td>
<td>(i) 157,236. 0. 0. 0. 7,847. 0. 165,083. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) GENERAL COUNSEL</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RIPSIMA TALVERDIAN</td>
<td>(i) 161,602. 2,500. 0. 66,578. 8,891. 239,571. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) CONTROLLER</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LEWIS GRONER</td>
<td>(i) 147,245. 5,000. 0. 42,568. 11,643. 206,456. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) VP MARKETING &amp; COMMUNICATION</td>
<td>(ii) 0. 0. 0. 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part III  Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 7

BONUS COMPENSATION

## SCHEDULE M (Form 990)

### Noncash Contributions

> Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

> Attach to Form 990.

> Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

#### Name of the organization
JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES 95-6111928

#### Employer identification number
95-6111928

### Part I  Types of Property

<table>
<thead>
<tr>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Art - Works of art</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Art - Historical treasures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Clothing and household goods</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6. Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Boats and planes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Securities - Publicly traded</td>
<td>X 443. 24,176,061. FMV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Securities - Partnership, LLC, or trust interests</td>
<td>X 5. 3,899,298. FMV</td>
<td></td>
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</tr>
<tr>
<td>12. Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Real estate - Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Real estate - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Collectibles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Food inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Taxidermy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Historical artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Scientific specimens</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>24. Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>25. Other ▶ (__________)</td>
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<td></td>
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<tr>
<td>26. Other ▶ (__________)</td>
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</tr>
<tr>
<td>27. Other ▶ (__________)</td>
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<td></td>
</tr>
<tr>
<td>28. Other ▶ (__________)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

- 29

#### 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?
- Yes
- No

#### 30a X

#### 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
- Yes
- No

#### 31 X

#### 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
- Yes
- No

#### 32a X

#### 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2018
Part II  Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I

COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED.
FORM 990, PART III, LINE 1
ORGANIZATION'S MISSION


FORM 990, PART III, LINE 4A
PROGRAM SERVICE ACCOMPLISHMENTS IN ORDER TO FULFILL OUR CHARITABLE MISSION, THE JEWISH COMMUNITY FOUNDATION OF LOS ANGELES OPERATES GRANT PROGRAMS THAT SUPPORT NUMEROUS NONPROFIT CAUSES LOCALLY, NATIONALLY AND INTERNATIONALLY IN BOTH THE JEWISH COMMUNITY AND IN THE GREATER COMMUNITY AT LARGE. TWO EXAMPLES ARE BELOW:

(A) LOCAL GRANTMAKING IN THE JEWISH COMMUNITY

IN THE LOS ANGELES JEWISH COMMUNITY, THE FOUNDATION ADMINISTERS ITS
CUTTING EDGE GRANTS INITIATIVE THAT FOCUSES ON NEW AND INNOVATIVE PROGRAMS OF HIGH VISIBILITY AND IMPACT. FOR EXAMPLE, IN 2018 THE FOUNDATION PROVIDED A $250,000 GRANT TO BET TZEDEK'S FOR THE SAKE OF OUR ELDERS: A CAMPAIGN TO FIGHT ELDER ABUSE IN THE JEWISH COMMUNITY. THE PROGRAM ADDRESSES THE PREVALENCE OF ELDER ABUSE IN THE LA COMMUNITY BY FOCUSING ON EMPOWERING OLDER ADULTS WITHIN THE JEWISH COMMUNITY TO IDENTIFY AND SPEAK OUT ON THE ISSUE, AND BY TRAINING JEWISH CLERGY AND EDUCATORS ON LEGAL RESPONSIBILITIES AND TACTICS FOR ENDING ELDER ABUSE.

(B) GRANTMAKING INTERNATIONALLY IN ISRAEL

THE FOUNDATION ALSO SEeks TO HELP REPAIR THE GREATER WORLD BEYOND LOS ANGELES AND CALIFORNIA. TO THAT END, IT PROVIDES GRANTS TO NATIONAL AND INTERNATIONAL ORGANIZATIONS. FOR EXAMPLE, THROUGH ITS ISRAEL GRANTS PROGRAM, EACH YEAR THE FOUNDATION AWARDS SEVERAL GRANTS THAT ADDRESS CRITICAL SOCIAL AND ECONOMIC ISSUES FACING ISRAELIS LIVING IN ISRAEL. THESE GRANTS ARE AWARDED FOR PROGRAMS THAT ARE ABLE TO HAVE A DRAMATIC IMPACT IN THE AREAS OF ECONOMIC DEVELOPMENT AND ECONOMIC SELF-SUFFICIENCY, AS WELL AS JEWISH IDENTITY. ONE RECIPIENT, AMUTAT KAIMA, RECEIVED A $230,000 GRANT FOR THEIR EMPLOYMENT AS EDUCATION PROGRAM THAT PROVIDES HANDS-ON AGRICULTURAL TRAINING AND COMPREHENSIVE WORKFORCE DEVELOPMENT TO AT-RISK YOUTH IN ISRAEL, EMPOWERING PARTICIPANTS TO REACH THEIR FULL POTENTIAL AND BECOME PRODUCTIVE MEMBERS OF ISRAELI SOCIETY.
GRANTMAKING THROUGH ENDOWMENT FUNDS

GRANTS ARE ALSO PROVIDED VIA ENDOWMENT FUNDS THAT THE FOUNDATION MANAGES.

AN ENDOWMENT FUND IS CREATED BY SOMEONE FOR ONE OR MORE CHARITABLE PURPOSES, AND IT BECOMES A PERMANENT LEGACY THAT PROVIDES ANNUAL SUPPORT TO A CAUSE OR ORGANIZATION. THESE INCLUDE:

* **PERMANENT LEGACY FUND** - AN ENDOWMENT FUND THAT SUPPORTS THE FOUNDATION'S ANNUAL GRANTS PROGRAMS AS DESCRIBED ABOVE, WHICH PROVIDE SEED FUNDING FOR EMERGING COMMUNITY NEEDS.

* **FIELD OF INTEREST LEGACY FUND** - THROUGH THIS ENDOWMENT FUND, DONORS MAY DESIGNATE GENERAL CAUSES OR FIELDS OF INTEREST THAT THEY WISH TO SUPPORT. THE FOUNDATION MAKES SURE THEIR CHARITABLE INTENTIONS ARE FULFILLED, EVEN AFTER THE DONORS THEMSELVES ARE NO LONGER LIVING.

* **RESTRICTED LEGACY FUND** - THIS IS AN ENDOWMENT FUND THROUGH WHICH A DONOR MAY SUPPORT ONE OR SEVERAL PARTICULAR CHARITIES OR NONPROFITS WITH THE ANNUAL EARNINGS OF THE FUND.

FORM 990, PART VI, LINES 6 & 7A

DESCRIPTION OF CLASSES OF MEMBERS OR STOCKHOLDERS JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES (JEWISH FEDERATION COUNCIL) IS THE SOLE MEMBER OF THE FOUNDATION.

FORM 990, PART VI, LINE 7B

DESCRIBE CLASSES OF PERSONS, DECISIONS REQUIRING APPROVAL AND TYPE OF
VOTING RIGHTS

JEWISH FEDERATION COUNCIL HAS THE RIGHT TO APPROVE AMENDMENTS TO THE
BY-LAWS OF THE FOUNDATION.

FORM 990, PART VI, LINE 11B
DESCRIPTION OF THE PROCESS USED TO REVIEW THE FORM 990

THE FORM 990 IS PREPARED BY AN OUTSIDE TAX FIRM. THE AUDIT COMMITTEE
REVIEWS THE FORM 990 (FOLLOWING MANAGEMENT'S REVIEW). THE FORM 990 IS
THEN PRESENTED TO THE ENTIRE BOARD FOR THEIR REVIEW AND COMMENT.

FORM 990, PART VI, LINE 12C
DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST

THE FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY THAT REQUIRES
OUR OFFICERS, TRUSTEES, AND COMMITTEE MEMBERS TO DISCLOSE ON AN ONGOING
BASIS (E.G., ANNUALLY) POTENTIAL CONFLICTS OF THEMSELVES AND THEIR FAMILY
MEMBERS ON A QUESTIONNAIRE DISTRIBUTED BY THE FOUNDATION CHAIR. THE
CHAIR, GENERAL COUNSEL, AND PRESIDENT AND CEO ENSURE THAT ALL
QUESTIONNAIRES ARE COMPLETED, REVIEW THEM FOR CONFLICTS, AND SUBMIT TO
THE BOARD FOR REVIEW ANY ACTUAL OR POTENTIAL CONFLICTS DISCLOSED IN THE
QUESTIONNAIRES. IN THE EVENT OF A POTENTIAL CONFLICT, PROSPECTIVE ACTIONS
INCLUDE THE CONFLICTED PARTY NOT VOTING ON THE MATTER.

FORM 990, PART VI, LINES 15A & 15B
PROCESS FOR DETERMINING COMPENSATION

COMPENSATION OF THE EXECUTIVE MANAGEMENT TEAM, MADE UP OF THE PRESIDENT
AND CEO, EXECUTIVE VICE PRESIDENTS, SENIOR VICE PRESIDENTS, AND VICE

FORM 990, PART VI, LINE 19

DOCUMENTATION AVAILABLE TO PUBLIC

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<table>
<thead>
<tr>
<th>NAME AND ADDRESS</th>
<th>DESCRIPTION OF SERVICES</th>
<th>COMPENSATION</th>
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</thead>
<tbody>
<tr>
<td>CANTERBURY CONSULTING</td>
<td>INVEST. CONSULTING</td>
<td>340,732.</td>
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<tr>
<td>660 NEWPORT DRIVE, SUITE 500 NEWPORT BEACH, CA 92660</td>
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<td>GOLDMAN SACHS</td>
<td>INVEST. MANAGEMENT</td>
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<td>200 WEST STREET NEW YORK, NY 10282</td>
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<td>GARDNER RUSSO &amp; GARDNER LLC</td>
<td>INVEST. MANAGEMENT</td>
<td>182,557.</td>
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<td>223 EAST CHESTNUT STREET LANCASTER, PA 17602</td>
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<tr>
<td>NORTHERN TRUST</td>
<td>INVEST. MANAGEMENT</td>
<td>168,329.</td>
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<td>50 SOUTH LASALLE STREET CHICAGO, IL 60603</td>
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<tr>
<td>ADAGE CAPITAL PARTNERS, LP</td>
<td>INVEST. MANAGEMENT</td>
<td>165,071.</td>
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<td>200 CLARENDON ST. #52 BOSTON, MA 02116</td>
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</table>
### Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CARSON MADRONA LLC 9440 SANTA MONICA BLVD LOS ANGELES, CA 90210</td>
<td>RENTAL R.E.</td>
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<td>2,801,686</td>
<td>26,391,196</td>
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| (2) | (3) | (4) | (5) | (6) |

### Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. BERKE FAMILY FOUNDATION 6355 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
<td>No</td>
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<tr>
<td>2. BILL &amp; RONNY LEVINE FOUNDATION 6355 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
<td>GENERAL SUPT</td>
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<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
<td>No</td>
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<tr>
<td>3. JACK E. &amp; RACHEL GINDI FDN 6355 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
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<tr>
<td>4. JEWISH FEDERATION COUNCIL OF GREATER LA 6355 WILSHIRE BLVD LOS ANGELES, CA 90048</td>
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<td>CA</td>
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<td>5. KASL FOUNDATION 6355 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
<td>GENERAL SUPT</td>
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<td>501(C)(3)</td>
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<td>JCF</td>
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<tr>
<td>6. KURTZMAN FAMILY FOUNDATION 6355 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
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<td>12, I</td>
<td>JCF</td>
<td>No</td>
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<tr>
<td>7. LER &amp; HERMAN OSTROW FAMILY FOUNDATION 6355 WILSHIRE BLVD, SUITE 1200 LOS ANGELES, CA 90048</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
<td>No</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

---

### Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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<td>Legal domicile (state or foreign country)</td>
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<td>End-of-year assets</td>
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### Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

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<td>Public charity status (if section 501(c)(3))</td>
<td>Direct controlling entity</td>
<td>Section 512(b)(13) controlled entity?</td>
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<tr>
<td>(1) LEONARD &amp; ANNETTE SHAPIRO FAMILY FDN</td>
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<td>12, I</td>
<td>JCF</td>
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<td>(3) RICHARD AND ROBERTA MARANTZ FAMILY FDN</td>
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<td>JCF</td>
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<td>(4) RUTH &amp; SONNY SINGER FOUNDATION</td>
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<td>(5) SINDER FAMILY FOUNDATION</td>
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<td>(6) THE ABRASBA FOUNDATION</td>
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<td>(7) THE EDNA &amp; MICKEY WEISS FAMILY FDN</td>
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<td>Public charity status (if section 501(c)(3))</td>
<td>Direct controlling entity</td>
<td>Section 512(b)(13) controlled entity?</td>
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<tr>
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<td>12, I</td>
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<tr>
<td>5555 WILSHIRE BLVD, SUITE 1200</td>
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<tr>
<td>(4) THE JEWISH COMMUNITY FDN CHARITABLE FUND</td>
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<tr>
<td>(5) THE JOYCE &amp; LAWRENCE POWELL FAMILY FDN</td>
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<td>(6) THE JUDY &amp; BERNARD BRKIN FAMILY FDN</td>
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<td>(7) THE LEVY CHERRY FOUNDATION</td>
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</table>
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<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) JEWISH COMMUNITY FOUNDATION OF THE JEWISH</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
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<td>(2) JEWISH COMMUNITY FOUNDATION OF THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES</td>
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<td>(3) THE LOUIS &amp; JUDITH MILLER FAMILY FDN</td>
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<td>(6) THE NIZNICK FAMILY FOUNDATION</td>
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**Part II**
Identification of Related Tax-Exempt Organizations. Complete if the organization answered “Yes” on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | Section 512(b)(13) controlled entity?
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<td>(5) THE PALERMO-RAVICH FOUNDATION</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
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<tr>
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<tr>
<td>(6) THE PEPP FAMILY SUPPORT FOUNDATION</td>
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<td>CA</td>
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<td>(7) THE SABAN CHARITABLE SUPPORT FUND</td>
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</table>
**SCHEDULE R (Form 990)**

**Related Organizations and Unrelated Partnerships**

- Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Identity of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

**Identity of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) THE SALTER FAMILY CHARITABLE FDN 95-3924344</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
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<tr>
<td>(2) THE SEYMOUR &amp; ELAINE MASOR FOUNDATION 95-4621783</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
<td>X</td>
</tr>
<tr>
<td>(3) THE SHIRLEY &amp; BURT HARRIS FAMILY FDN 95-4246144</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
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<tr>
<td>(4) THE STEVEN &amp; LOTTY WALKER FAMILY FDN 95-4095677</td>
<td>GENERAL SUPT</td>
<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
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<tr>
<td>(5) THE TOM &amp; SONDRA RYKOFF FAMILY FDN 95-4651913</td>
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<td>12, I</td>
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<tr>
<td>(6) THE TRENA &amp; STANLEY GREITZER FAMILY FDN 95-4716089</td>
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<tr>
<td>(7) THE ZIERING FAMILY FOUNDATION 95-4556596</td>
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<td>CA</td>
<td>501(C)(3)</td>
<td>12, I</td>
<td>JCF</td>
<td>X</td>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## Identification of Disregarded Entities

**Part I**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name, address, and EIN (if applicable) of disregarded entity</strong></td>
<td><strong>Primary activity</strong></td>
<td><strong>Legal domicile (state or foreign country)</strong></td>
<td><strong>Total income</strong></td>
<td><strong>End-of-year assets</strong></td>
<td><strong>Direct controlling entity</strong></td>
</tr>
</tbody>
</table>

1. 

2. 

3. 

4. 

5. 

6. 

## Identification of Related Tax-Exempt Organizations

**Part II**

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name, address, and EIN of related organization</strong></td>
<td><strong>Primary activity</strong></td>
<td><strong>Legal domicile (state or foreign country)</strong></td>
<td><strong>Exempt Code section</strong></td>
<td><strong>Public charity status (if section 501(c)(3))</strong></td>
<td><strong>Direct controlling entity</strong></td>
<td><strong>Section 512(b)(13) controlled entity?</strong></td>
</tr>
</tbody>
</table>

1. TIRUN OLAM FOUNDATION 95-4871770
   - 6505 WILSHIRE BLVD, SUITE 1200
   - LOS ANGELES, CA 90048
   - GENERAL SUPT
   - CA
   - 501(C)(3)
   - 12, I
   - JCF
   - Yes

2. WHIZIN SUPPORT FOUNDATION 95-4571058
   - 6505 WILSHIRE BLVD, SUITE 1200
   - LOS ANGELES, CA 90048
   - GENERAL SUPT
   - CA
   - 501(C)(3)
   - 12, I
   - JCF
   - Yes

3. THE HALAJ FOUNDATION 95-4500852
   - 1311 VIA COLUNITA
   - RIV, CA 90272
   - GENERAL SUPT
   - CA
   - 501(C)(3)
   - 12, III-NFI
   - JCF
   - Yes

4. BERNARD AND RENA SHAPIRO FAMILY SUPT ORG 83-2718308
   - 6505 WILSHIRE BLVD, SUITE 1200
   - LOS ANGELES, CA 90048
   - GENERAL SUPT
   - CA
   - 501(C)(3)
   - 12, I
   - JCF
   - Yes

5. 

6. 

7. 

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III: Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Name, address, and EIN of related organization</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Direct controlling entity</th>
<th>Predominant income (related, unrelated, excluded from tax under sections 512 - 514)</th>
<th>Share of total income</th>
<th>Share of end-of-year assets</th>
<th>Disproportionate allocations?</th>
<th>Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>General or managing partner?</th>
<th>Percentage ownership</th>
</tr>
</thead>
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### Part IV: Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Name, address, and EIN of related organization</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Direct controlling entity</th>
<th>Type of entity (C corp, S corp, or trust)</th>
<th>Share of total income</th>
<th>Share of end-of-year assets</th>
<th>Section 512(b)(13) controlled entity?</th>
<th>Percentage ownership</th>
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</thead>
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</table>

Schedule R (Form 990) 2018
**Part V  Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

   - **a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.
   - **b** Gift, grant, or capital contribution to related organization(s).
   - **c** Gift, grant, or capital contribution from related organization(s).
   - **d** Loans or loan guarantees to or for related organization(s).
   - **e** Loans or loan guarantees by related organization(s).
   - **f** Dividends from related organization(s).
   - **g** Sale of assets to related organization(s).
   - **h** Purchase of assets from related organization(s).
   - **i** Exchange of assets with related organization(s).
   - **j** Lease of facilities, equipment, or other assets to related organization(s).
   - **k** Lease of facilities, equipment, or other assets from related organization(s).
   - **l** Performance of services or membership or fundraising solicitations for related organization(s).
   - **m** Performance of services or membership or fundraising solicitations by related organization(s).
   - **n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).
   - **o** Sharing of paid employees with related organization(s).
   - **p** Reimbursement paid to related organization(s) for expenses.
   - **q** Reimbursement paid by related organization(s) for expenses.
   - **r** Other transfer of cash or property to related organization(s).
   - **s** Other transfer of cash or property from related organization(s).

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
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<td>(1) TIKUN OLAM FOUNDATION</td>
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<td>166,773. CASH</td>
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<td>(2) KASL FOUNDATION</td>
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<td>137,554. CASH</td>
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<td>(3) JACK E. &amp; RACHEL GINDI FOUNDATION</td>
<td>C</td>
<td>467,500. CASH</td>
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<tr>
<td>(4) THE EMQUIES FAMILY SUPPORT FOUNDATION</td>
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<td>87,167. CASH</td>
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<tr>
<td>(5) THE NEWTON D. &amp; ROCHELLE F. BECKER FOUNDATION</td>
<td>C</td>
<td>275,000. CASH</td>
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<tr>
<td>(6) THE GOREN FAMILY FOUNDATION</td>
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<td>50,464. CASH</td>
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</table>
**Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Part V**

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

   - **a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.
   - **b** Gift, grant, or capital contribution to related organization(s).
   - **c** Gift, grant, or capital contribution from related organization(s).
   - **d** Loans or loan guarantees to or for related organization(s).
   - **e** Loans or loan guarantees by related organization(s).
   - **f** Dividends from related organization(s).
   - **g** Sale of assets to related organization(s).
   - **h** Purchase of assets from related organization(s).
   - **i** Exchange of assets with related organization(s).
   - **j** Lease of facilities, equipment, or other assets to related organization(s).
   - **k** Lease of facilities, equipment, or other assets from related organization(s).
   - **l** Performance of services or membership or fundraising solicitations for related organization(s).
   - **m** Performance of services or membership or fundraising solicitations by related organization(s).
   - **n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).
   - **o** Sharing of paid employees with related organization(s).
   - **p** Reimbursement paid to related organization(s) for expenses.
   - **q** Reimbursement paid by related organization(s) for expenses.
   - **r** Other transfer of cash or property to related organization(s).
   - **s** Other transfer of cash or property from related organization(s).

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) THE ABRASBA FOUNDATION</td>
<td>C</td>
<td>1,127,500.</td>
<td>CASH</td>
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<td>(2) THE SABAN CHARITABLE FUND</td>
<td>B</td>
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**Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners section 501(c)(3) organizations?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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Part VII  Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.