**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

A F	or the	2021 calendar year, or tax year beginning and o	ending		
<b>B</b> c	heck if pplicable	C Name of organization		D Employer identific	cation number
	Addres	JEWISH FEDERATION COUNCIL OF GREATER L	Α		
	Name change			95-16433	88
	Initial return		Room/suite	E Telephone numbe	r
	Final return/	6505 WILSHIRE BLVD.		323-761-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	46,464,812.
	Amend return	LOS ANGELES, CA 90040		H(a) Is this a group re	eturn
	Application	F Name and address of principal officer: JAY SANDERSON		for subordinates	? Yes X No
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) ( ) $\mathbf{\blacktriangleleft}$ (insert no.) $\overline{}$ 4947(a)(1) o	or 527	If "No," attach a	list. See instructions
		e: WWW.JEWISHLA.ORG		H(c) Group exemptio	
K F	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1937 N	M State of legal domicile: CA
Pa	rt I	Summary			
Φ		Briefly describe the organization's mission or most significant activities: BASEI			
auc		JEWISH FEDERATION OF GREATER LOS ANGELES			
Activities & Governance	l	Check this box  if the organization discontinued its operations or dispose		L _	
ું				3 4	61
<u>«</u>	ı	Number of independent voting members of the governing body (Part VI, line 1b)			155
ties		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			400
ţ		Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ac		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
		Net differenced business taxable income from 1 only 330-1,1 art 1, life 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		49,006,357.	43,445,009.
Jue		Program service revenue (Part VIII, line 2g)		151,046.	134,827.
Revenue	l	investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,051,690.	1,220,817.
æ	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-705,610.	-1,006,502.
	l	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		49,503,483.	43,794,151.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		21,390,089.	21,630,566.
	ı	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ဟွ	45 .	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		17,550,123.	16,353,997.
Expenses	16a l	Professional fundraising fees (Part IX, column (A), line 11e)		0.	229,169.
ç	b ·	Total fundraising expenses (Part IX, column (D), line 25) $ ightharpoonup$ $ ightharpoonup$ $ ho$ , $ ho$ 3	32.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,845,011.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		45,785,223.	46,354,901.
	19	Revenue less expenses. Subtract line 18 from line 12		3,718,260.	-2,560,750.
Net Assets or Fund Balances				ginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		85,160,964.	190,865,704.
at Age	21	Total liabilities (Part X, line 26)		43,990,664.	40,349,626.
Z: D:	rt II	Net assets or fund balances. Subtract line 21 from line 20	⊥	41,170,300.	150,516,078.
		ties of perjury, I declare that I have examined this return, including accompanying schedules	and atatama	and to the heat of my	/ knowledge and balief it is
		thes of perjury, I declare that I have examined this return, including accompanying scriedules t, and complete. Declaration of preparer (other than officer) is based on all information of whi			/ Kilowieuge aliu bellei, it is
uu,	COLLEC	t, and complete. Equivalently of preparer (other than officer) is based on an information of win	ion proparoi	11/21/2022	
Sigi	,	Signature of officer		Date	<u>2</u>
Her		IVAN WOLKIND, CFO/COO			
1101	<b>`</b>	Type or print name and title			
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN
Paid		LISA M. CUMMINGS, CPA LISA M. CUMMINGS	s, CP 1	1/15/22 if self-employ	P00043433
Prep	1	Firm's name COHNREZNICK LLP	I		22-1478099
	Only	Firm's address 621 CAPITOL MALL, SUITE 2150			
_	_	SACRAMENTO, CA 95814		Phone no.91	6-442-9100
May	the IF	S discuss this return with the preparer shown above? See instructions		•	X Yes No

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	BASED ON JEWISH VALUES, THE JEWISH FEDERATION OF GREATER LOS ANGELES
	CONVENES AND LEADS THE COMMUNITY AND LEVERAGES ITS RESOURCES TO ASSURE
	THE CONTINUITY OF THE JEWISH PEOPLE, SUPPORT A SECURE STATE OF ISRAEL,
	CARE FOR JEWS IN NEED HERE AND ABROAD, AND MOBILIZE ON ISSUES OF
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
7	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 \$18,015,521. including grants of \$11,419,575. ) (Revenue \$134,972.)
та	ENSURING THE JEWISH FUTURE:
	THE FEDERATION CREATES OPPORTUNITIES FOR PEOPLE OF ALL AGES TO
	PARTICIPATE AND CELEBRATE IN JEWISH LIFE AND CONNECT WITH THE COMMUNITY
	AND ISRAEL. AS THE HUB OF THE COMMUNITY, THE FEDERATION IS UNIQUELY
	POSITIONED TO CONNECT JEWS TO ONE ANOTHER AND MAKE JEWISH LIFE
	ACCESSIBLE AND AFFORDABLE BY LEVERAGING THE STRENGTH OF OUR MEMBERS AND
	WORKING CLOSELY WITH OUR NETWORK OF TRUSTED PARTNERS.
	WORKING CLOSELLI WITH OOK NEIWORK OF TROSTED TAKINDRS.
4b	(Code:) (Expenses \$ 14,118,172. including grants of \$9,264,551.) (Revenue \$)
	CARING FOR JEWS IN NEED:
	THE FEDERATION LEVERAGES THE STRENGTH OF ITS COMMUNITY TO PROVIDE AID
	FOR JEWS IN NEED. THE WELL-BEING OF JEWISH SENIORS IS ALSO A CORE
	PRIORITY, ESPECIALLY WHEN A SENIOR IS A HOLOCAUST SURVIVOR. OUR WORK
	ALSO INCLUDES SEEING TO DAILY NECESSITIES OF THOSE IN NEED, CONNECTING
	PEOPLE TO THE SKILLS AND SERVICES NECESSARY TO BE SELF-SUFFICIENT, AND
	ENSURING CHILDREN WITH SPECIAL NEEDS AND OTHER AT-RISK CASES HAVE THEIR
	NEEDS MET AND CAN PARTICIPATE IN JEWISH LIFE. THE FEDERATION IS ABLE TO
	CARE FOR OUR OWN COMMUNITY BY WORKING WITH PARTNERS IN LOS ANGELES,
	ISRAEL, AND AROUND THE WORLD.
4c	(Code:) (Expenses \$ 1,942,053. including grants of \$ 946,439. ) (Revenue \$ 0. )
	COMMUNITY ENGAGEMENT:
	THE JEWISH FEDERATION HAS ENGAGED IN OUR CITY, PROMOTING AN INCLUSIVE
	COMMUNITY THAT REFLECTS THE BEST OF AMERICAN AND JEWISH VALUES. THE
	PURSUIT OF A JUST SOCIETY, ENSURING A STRONG JEWISH FUTURE AND
	PROMOTING A SAFE AND VIBRANT ISRAEL ARE THE ENDURING CORNERSTONES OF
	OUR WORK. WE ENGAGE THE COMMUNITY BY PROVIDING ROBUST SERVICE AND
	VOLUNTEER OPPORTUNITIES, SHAPING POLICY AND ADVOCATING FOR ISRAEL.
	TOGETHER AS A COMMUNITY, AND WITH DIVERSE PARTNERS ACROSS LOS ANGELES,
	WE CAN SHAPE THE FUTURE OF OUR CITY.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 34,075,746.
	Form <b>990</b> (2021)

#### Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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? If "Yes," complete Schedule C, Part II	4	Х	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> X</u>
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?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l	Х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	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	11d	х	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's siability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
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? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		7.7	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
۱ ۲	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	Х	

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Form 990 (2021) JEWISH FEDERATION
Part IV Checklist of Required Schedules (continued)

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 "Yes," complete Schedule Parts I and III 22 X Did the organization answer "Not to Part IVI, Section A. Inis 3.4 or 6 a, 5out compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Parts IVI, 1900 or 1900 o		i (continuou)			Yes	No
Part X, column (A), line 2? (if Yes, "complete Schedule I, Parts I and III and Common Cifficent, direction, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, and Common Cifficent, direction, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, and Common Cifficent, direction, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, and Common Cifficent, direction, trustees, key employees, and highest compensated employees? If "Yes," compensated memory and compensated of the set day of the year, that was issued after December 31, 2002? If "Yes," crasure lines 24th through 24d and complete Schedule I, William Cifficent and Compensated Cifficent Ci	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individu	als on		162	NO
23 bit the organization answer "Yes" to Part VII, Section A, lies 3, 4, or 5, about compensation of the organization sournest and former offeren, directors, trustees, key employees, and highest compensated employees" // "Yes," complete Schedule / Jan. Jan. Jan. Jan. Jan. Jan. Jan. Jan.				22	Х	
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 1, and the set as 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 "Yes," arrayer lines 240 through 240 and complete Schedule K. If "No," go to line 25a.  Did the organization invest any proceeds of tax exempt bonds beyond a temporary pariod exception?  24b.  Did the organization invest any proceeds of tax exempt bonds provided and complete Schedule V. If "No," go to line 25a.  Did the organization invest any proceeds of tax exempt bonds govern a temporary pariod exception?  24c.  Did the organization are as no on behalf of issuer for bonds outstanding at any time during the year?  24d.  Did by the organization are as no on behalf of issuer for bonds outstanding at any time during the year?  24d.  Did by the organization area as no on behalf of issuer for bonds outstanding at any time during the year?  25a.  Let be the organization area as no on behalf of issuer for bonds outstanding at any time during the year?  25b.  Let be the organization area as no on behalf of issuer for bonds outstanding at any time during the year?  25c.  Let be the organization area as no on behalf of issuer for bonds outstanding at any time during the year?  25d.  Let be the organization area as no on behalf of issuer for bonds outstanding at any time during the year?  25d.  Let be organization area on the person during the year?  Did the organization area on the person during the year?  25d.  Let be organization area on the person during the year?  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former office, decide, rutates, key employee, creator or founder, substantial contributor, as 396 controlled entity or framiny member of any of these persons? If "Yes," complete Schedule I, Part IV, IV.  Did the organization provide any part or other assist	23					
Schedule / La all did not eyanization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? // *Yes,* answer fines 24b through 24d and complete Schedule // *Yes,* to fine 25e.  Schedule K. // *Ne.* go to line 25e.  Did the organization meets any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization meets any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization markanian an escrew account other than a refunding escrew at any time during the year?  24d						
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the list day of the year, that was issued after December 31,2002? If "Yes," answer lines 24th through 24th and complete Schedule K. If "No." go to sine 25s bit of the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax exempt bonds?  24b Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax exempt bonds?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes, "complete Schedule L, Part I 25s X  b is the organization avare that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior forms 900 or 990-E27 If "Yes," complete Schedule L, Part I 25b X  5 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former offloor, director, rustee, key employee, creator or founder, substantial contributor, or 39% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 25b X  27 Did the organization provide a grant or other assistance to any current or former offlioer, director, rustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity from thereof for applicable limpt threefolds, conditions, and exceptions):  a A current or former offlicer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part II 25b X  28 Was the organization in excelve thereof or family member of any or three persons? If "Yes," complete Schedule II, Part II 25b X  29 Did the organization three or or more individuals				23	Х	
Schedule K. If "No." go to fine 25a b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d   25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualled person during the year? If Yes," complete Schedule L, Part I   25a	24a		1 \$100,000 as of the			
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b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  2 bid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  4 Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?   Yes, "complete Schedule 1, Part I   Yes, Yes, Yes				24a		X
any tax-exempt bonds?  d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule 1, Part I    25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of uring the year? If 'Yes,' complete Schedule 1, Part I    25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule 1, Part I    25c Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of rounder, substantial contributor or employee, creator or founder, substantial contributor or organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I, Part I    27c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part I    28d X    29d Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part I    28d X    29d Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part I    29d Did the organization over 100% of an entity disregarded as separate from the organization under Regulations sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule II	b			24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d    25a Saction 501(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? (if "Yes," complete Schedule L, Part I    25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 (if "Yes," complete Schedule L, Part I    25c Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-E27 (if "Yes," complete Schedule L, Part I    25c Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 39% controlled entity fincluding an employee thereof) of rainly member of any of these persons? (if "Yes," complete Schedule L, Part I    25d Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part I    25d Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part I    25d Was the organization receive more than \$250,001 in non-cash contributions? If "Yes," complete Schedule L, Part I    25d Was the organization receive more than \$250,001 in non-cash contributions? If "Yes," complete Schedule I, Part I    25d Was the organization in elaction to make any transaction with engalization under Regulations sections 301,7701.37   If Yes, complete Schedule R, Part I, III, III, III, III, III, III, III,	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the	e year to defease			
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d    25a Saction 501(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? (if "Yes," complete Schedule L, Part I    25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 (if "Yes," complete Schedule L, Part I    25c Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-E27 (if "Yes," complete Schedule L, Part I    25c Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 39% controlled entity fincluding an employee thereof) of rainly member of any of these persons? (if "Yes," complete Schedule L, Part I    25d Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part I    25d Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part I    25d Was the organization receive more than \$250,001 in non-cash contributions? If "Yes," complete Schedule L, Part I    25d Was the organization receive more than \$250,001 in non-cash contributions? If "Yes," complete Schedule I, Part I    25d Was the organization in elaction to make any transaction with engalization under Regulations sections 301,7701.37   If Yes, complete Schedule R, Part I, III, III, III, III, III, III, III,		any tax-exempt bonds?		24c		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // if Yes, "complete Schedule I, Part I   25b   X   X   25b   Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part II   26   X   X   X   X   X   X   X   X   X	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year	?	24d		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes," complete Schedule I, Part II	25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess	ss benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27   If "Yes," complete Schedule I, Part I    25 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part II    26 X  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III    28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III    28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III    28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV    28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV    28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M    29 X    29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M    30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I    31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37    32 Did the organization receive dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I    33 Did the organization have a controlled entity within the meaning o		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a		Х
Schedule L, Part II  26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 39% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27  28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III 27  29 Lat A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28a 28b X 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 Did the organization selection liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I II 30 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I II 31 X 31 Did the organization selection of the particular or the particular or explaination of the particular or explaination or explaination or explaination or explaination or explaination or explaination or ex	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in	a prior year, and			
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or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		Schedule L, Part I		25b		X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.  28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II.  30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule II.  31 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule II.  32 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 "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfer to an exempt non-charita	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any	current			
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creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.  27		controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		26		X
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 288 X  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 288 X  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X  31 Did the organization receive ontributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X  31 Did the organization will use the substantial contributions? If "Yes," complete Schedule N, Part I 31 X  32 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 "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35a Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X  b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 501(c)(3) organizations. Did the organization make any transfers to an exempt non charitable related organization?  If "Yes," complete Schedule R, Part V, line 2 36 X  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non charitable related organization?	27	Did the organization provide a grant or other assistance to any current or former officer, director, trust	ee, key employee,			
Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV.  28a X  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28b X  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 DX  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization individual, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 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 "Yes," complete Schedule R, Part II  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 Did the organization conduct more than 5% of its activities through an entity that is not a related organizatio						
instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV.  28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 X  31 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes," to line 35a, did the organization receive way paymment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?  b If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization meant has any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization concleve any		entity (including an employee thereof) or family member of any of these persons? If "Yes," complete s	Schedule L, Part III	27		X
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #  "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #  "Yes," complete Schedule L, Part IV  28a X  28b X  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #  "Yes," complete Schedule L, Part IV  28c X  29 X  30 Did the organization receive more than \$25,000 in non-cash contributions? # "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? # "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes," complete Schedule N, Part I  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? # "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  31 Bid the organization have a controlled entity within the meaning of section 512(b)(13)?  32 bif the organization have a controlled entity within the meaning of section 512(b)(13)?  33 bif the organization have a controlled entity within the meaning of section 512(b)(13)?  34 bif "Yes," complete Schedule R, Part V, Iine 2  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36 Yes, "complete Schedule R, Part V, Iine 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization  38 Did the organization conduct more than 5% of its activities through an entity that is not a related organization  39 A X  30 Did the organization conduct more than 5% of its activities through an entity that is not a related organization  30 A X  31	28	Was the organization a party to a business transaction with one of the following parties (see the Sche	dule L, Part IV,			
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b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 Did the organization inguidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  37 If "Yes," complete Schedule R, Part V, Iine 2  38 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 "Yes," complete Schedule R, 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  10 Did the organization complete Schedule O nilne 1a. Enter -0 if not applicable  11 Did the organization o	а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contribu	tor? If			
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Lid the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 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 "Yes," complete Schedule R, Part I  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  37 If "Yes," complete Schedule R, Part V, line 2  38 Did the organization conduct more than 5% of its activities through an entity that is not a related organization?  37 If "Yes," complete Schedule R, Part V, Iine 2  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  29 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  29 Did the organization co				28a		
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Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 X 32 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 "Yes," complete Schedule R, Part I 32 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 55b If "Yes" 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 "Yes," complete Schedule R, Part V, line 2 35b X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 35b X 35b 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 "Yes," complete Schedule R, Part V Ines 1 37 X 38 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 "Yes," complete Schedule R, Part V Ines 1 1 A 5 X 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	С	$A \ 35\% \ controlled \ entity \ of \ one \ or \ more \ individuals \ and/or \ organizations \ described \ in \ line \ 28a \ or \ 28b?$	If			
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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 "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes" 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 "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  35b X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19?  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  Check if Schedule O contains a response or note to any line in this Part V  The number of Forms W-2G included on line 1a. Enter -0- if not applicable  C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize wi		"Yes," complete Schedule L, Part IV		28c		X
contributions? If "Yes," complete Schedule M 30	29	•		29	Х	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I.  33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V!  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  10 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  11	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	ed conservation			
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X  b If "Yes" 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 "Yes," complete Schedule R, Part V, line 2 35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O may line in this Part V  That I be Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 61 1b 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				30		
Schedule N, Part II  32	31			31		Х
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33				32		X
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Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes" 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 "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 Jud 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 "Yes," complete Schedule R, Part VI  37 Jud the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  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  1 Section 501(c)(3) organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1 c X				33		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes" 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 "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  38 X  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  10 Yes No  11 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  12	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part	t II, III, or IV, and			
b If "Yes" 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 "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 37 X  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V						
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Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36  X  37  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38  Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  10  11  Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  36  X  X	b					77
If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  36 X  X  X  A  A  A  A  A  A  A  A  A  A  A				35b		X
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 "Yes," complete Schedule R, Part VI  37	36		· ·			3.7
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  10 In				36		X
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Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Take Inter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  38  X  Yes No  1a Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1a 61  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b 0  1c X	00			37		Λ
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  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X	38				<sub>V</sub>	
Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	Par	Note: All Form 990 filers are required to complete Schedule 0		38	Ā	
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  Yes No  1a 61  b Did the Office of the Office	rai					
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable     1a     61       b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable     1b     0       c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?     1c     X		Check it Schedule C contains a response or note to any line in this Part V				<u> </u>
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		5	_		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X						
(gambling) winnings to prize winners?						
	С			4.	v	
	105					(0004)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	37	
a	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	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		\ <del></del>
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	Х	
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h	25	
8		8		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	8		
а	Did the angular term of the term of the state of the stat	9a		
b	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	OD.		
а	Initiation fees and capital contributions included on Part VIII, line 12			
11				
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.			
b	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
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		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 51			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 61			
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?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	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?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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 on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This social 2 register members as say person to regarder by the morning restricted		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
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)s	only)	availal	ole
. =	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.		ui	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	IVAN WOLKIND - 323-761-8000			
	6505 WILSHIRE BLVD., LOS ANGELES, CA 90048			

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

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

#### 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos			nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ot check more than one nless person is both an r and a director/trustee)				compensation	compensation	amount of
	week		cer an	id a di	recto	r/trus	iee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	ord	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		ee	npen		1099-NEC)	1099-1120)	and related
	below	Individual trustee or director	In stit utio nal tru stee	_	old m	st col	70	1000 1120)		organizations
	line)	Indivi	Instit	Officer	Key employee	Highest compensated employee	Former			· ·
(1) JAY SANDERSON	38.00									
CEO/PRESIDENT (OUTGOING)				Х				698,279.	0.	19,500.
(2) ANDREW CUSHNIR	38.00									
EXEC VP DONOR RELATIONS						Х		335,865.	0.	67,834.
(3) IVAN WOLKIND	38.00									
CFO/COO				Х				348,070.	0.	27,084.
(4) REBECCA SOBELMAN-STERN	38.00									
EVP CHIEF PROGRAM OFFICER				Х				274,471.	0.	25,645.
(5) CYNTHIA AYALA	38.00									
SVP ADMINISTRATION & HR					Х			187,261.	0.	87,764.
(6) ROBERT GOLDENBERG	38.00									
CHIEF CREATIVE OFFICER						X		260,702.	0.	1,792.
(7) LORI TESSEL	38.00									
SVP DONOR RELATIONS					Х			250,076.	0.	3,744.
(8) CAROL KORANSKY	38.00									
EXEC VP SPECIAL COUNSEL						X		229,652.	0.	18,215.
(9) SHIRA ROSENBLATT	38.00									
SVP JEWISH EDUC & ENG					Х			189,964.	0.	18,030.
(10) ELIZABETH BERGER	38.00									
SR VP DONOR REL & PLANNED						X		167,754.	0.	33,817.
(11) MITCHELL HAMERMAN	38.00									
SVP CAMPAIGN MANAGER						X		173,603.	0.	27,275.
(12) NOAH FARKAS	38.00									
CEO/PRESIDENT				Х				75,000.	0.	6,000.
(13) ALAN KLEINMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(14) ALBERT Z. PRAW	1.00									
CHAIR OF THE BOARD		Х		Х				0.	0.	0.
(15) ALEX WEINGARTEN	1.00									
DIRECTOR		Х						0.	0.	0.
(16) ALEXANDRA SHABTAI	1.00									
DIRECTOR		Х						0.	0.	0.
(17) ALLISON ROSENTHAL	1.00	]								
DIRECTOR		Х						0.	0.	<b>0.</b>

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	EDERATIO	N	CO	UN	CI	L	OE	GREATER LA	95-16	43	388	Р	age 8	
Part VII   Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)					
(A)	(B)			(C				(D)	(E)			(F)		
Name and title	Average	(do		Posi heck r			nne.	Reportable	Reportable		Es	timate	ed	
	hours per	box	, unle	ss per	son i	s both	n an	compensation	compensation	.	am	ount	of	
	week		cer an	id a di	recto	r/trus	tee)	from	from related			other		
	(list any hours for	recto						the	organizations			pensa		
	related	or di	ee ee			ated		organization	,	(W-2/1099-MISC/ from 1099-NEC) organi				
	organizations	ustee	trust		96	ubeu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)			arıızaı d relat		
	below	dual t	rtiona	_	nploy	st cor	-	1				ınizati		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				3-			
(18) ANDREA CAYTON	1.00	_	_	_	_					$\neg$				
DIRECTOR		Х						0.		0.			0.	
(19) ANDREW ALTSHULE	1.00							-						
DIRECTOR		Х						0.		0.			0.	
(20) CECE FEILER	1.00									$\neg$				
DIRECTOR		Х						0.		0.			0.	
(21) DAVID NAGEL	1.00													
DIRECTOR		Х						0.		0.			0.	
(22) DEBBIE ATTANASIO	1.00													
DIRECTOR		Х						0.		0.			0.	
(23) DEBI GRABOFF	1.00													
DIRECTOR		Х						0.		0.			0.	
(24) DONNA BENDER	1.00													
DIRECTOR		Х						0.		0.			0.	
(25) DOUG MANKOFF	1.00									$\neg$				
DIRECTOR		Х						0.		0.			0.	
(26) ELLEN SILVERMAN	1.00							-						
DIRECTOR		Х						0.		0.			0.	
1b Subtotal							<u> </u>	3,190,697.		0.	336	5,7		
c Total from continuation sheets to Part VII							•	0.		0.			0.	
d Total (add lines 1b and 1c)							•	3,190,697.		0.	330	5,7	00.	
2 Total number of individuals (including but no							o re	•	000 of reportable					
compensation from the organization						,			•				11	
												Yes	No	
3 Did the organization list any <b>former</b> officer,	director, trust	ee, k	еу е	empl	oye	e, or	hic	hest compensated emp	loyee on					
line 1a? If "Yes." complete Schedule J for su	uch individual		•	·	•				•		3		Х	
4 For any individual listed on line 1a, is the su									he organization					
and related organizations greater than \$150											4	Х		
5 Did any person listed on line 1a receive or a														
rendered to the organization? If "Yes." com	=				-			~			5		х	
Section B. Independent Contractors	onoto oomodan	J U 1.	0, 00	, , , ,	70,0	<u> </u>								
Complete this table for your five highest cor	mpensated inc	lepe	nder	nt cc	ontra	acto	rs th	hat received more than \$	100,000 of compe	ensat	tion fro	m		
the organization. Report compensation for t	•	-							· · · · · · · · · · · · · · · · · · ·					
(A)								(B)			(C	;)		
Name and business	address	N	ONE	3				Description of s	ervices	С	omper		n	
2 Total number of independent contractors (in		ot lir	nited	to t	thos	e lis	ted	above) who received me	ore than					
\$100,000 of compensation from the organiz					(	)						202		
SEE PART VII, SECTION	A CONT	TN	UΑ	T,T	UΝ	S	ΗĒ	EETS			Form 9	99U (	2021)	

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ustees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employe	es (continued)	
(B)			(0	C)			(D)	(E)	(F)
Average							Reportable	Reportable	Estimated
	(C	neck	all ·	that	app	y)		·	amount of other
· ·					ee				compensation
(list any	ctor				n ploy		organization	(W-2/1099-MISC)	from the
hours for	rdire				ted er		(W-2/1099-MISC)		organization
related	stee c	ruste		au au	pensa				and related
1 ~	nal tru	ional t		ploye	tcom				organizations
line)	ndivid	nstitut	Officer	(ey em	Highest	-ormer			
1.00	Ē	_			_	_			
	Х						0.	0.	0.
1.00									
	Х						0.	0.	0.
1.00									
	Х						0.	0.	0.
1.00									
	Х						0.	0.	0.
1.00									
	Х		Х				0.	0.	0.
1.00									
	Х						0.	0.	0.
1.00									
	Х						0.	0.	0.
1.00									
	Х		Х				0.	0.	0.
1.00									
	Х		X				0.	0.	0.
1.00								_	
	Х						0.	0.	0.
1.00	ļ							•	•
1 00	Х						0.	0.	0.
1.00	.,							0	0
1 00	X						0.	0.	0.
1.00	<b>.</b> ,							0	0
1 00	Λ						0.	0.	0.
1.00	~						_	0	0
1 00	Λ						0.	0.	0.
1.00	v						0	0	0.
1 00	Λ						0.	0.	0.
1.00	v						0	0	0.
1.00								J •	<b>U</b> •
1.00	x						0.1	0 .	0.
1.00									<b>.</b>
	Х						0.	0 -	0.
1.00	<u> </u>							3.	31
	Х		х				0.	0.	0.
1.00									
	4			1	1		1	_	_
	Х						0.	0.	0.
	(B) Average hours per week (list any hours for related organizations below line)  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00  1.00	(B) Average hours per week (list any hours for related organizations below line)  1.00  X  1.00	(B) Average hours per week (list any hours for related organizations below line)  1.00  X  1.00	(B) Average hours per week (list any hours for related organizations below line)  1.00  X  X  1.00  X  X  X  1.00  X  X  X  X  X  X  X  X  X  X  X  X	(B) Average hours per week (list any hours for related organizations below line)  1.00	(B) Average hours per week (list any hours for related organizations below line)  1.00	CC	C	Average hours per week (list any hours for related organizations below line)

Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (	Compensated Employe	es (continued)	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	appl	ly)	compensation	compensation	amount of
	per week					в		from the	from related organizations	other compensation
	(list any	tor				Highest compensated employee		organization	(W-2/1099-MISC)	from the
	hours for	direc-				ed em		(W-2/1099-MISC)	(** ±* 1000 111100)	organization
	related	tee or	ustee			en sa t		,		and related
	organizations	al trus	ınal tr		loyee	dwoc				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	hesto	Former			
	line)	pul	su	0#!	Key	Hig	For			
(47) LYNN BIDER	1.00									
VICE CHAIR OF THE BOARD		Х		Х				0.	0.	0.
(48) LYNNE BROOKMAN	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(49) MARC ROHATINER	1.00	ļ								
DIRECTOR	1 00	Х						0.	0.	0.
(50) MARK LAINER	1.00	ļ							•	
DIRECTOR	1 00	Х						0.	0.	0.
(51) MARK WEINSTEIN	1.00								•	•
DIRECTOR	1 00	Х						0.	0.	0.
(52) MARVIN SCHOTLAND	1.00	.,							0	•
DIRECTOR	1 00	Х						0.	0.	0.
(53) MICHAEL HACKMAN	1.00	<b>.</b> ,						_	0	0
DIRECTOR (54) MICHAEL TUCHIN	1.00	Х						0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0
(55) MICHAEL ZIERING	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(56) MOSHE SASSOVER	1.00	Λ						0.	0.	<b>0</b> •
DIRECTOR	1.00	Х						0.	0.	0.
(57) NANCY BEISER	1.00	25						0.	0.	•
DIRECTOR	1.00	Х						0.	0.	0.
(58) NANCY S. COHEN	1.00							•	•	•
DIRECTOR	1100	х						0.	0.	0.
(59) ORNA WOLENS	1.00								0.1	
GENERAL CAMPAIGN CHAIR		х		х				0.	0.	0.
(60) RABBI JOSHUA HOFFMAN	1.00								<u> </u>	
DIRECTOR		Х						0.	0.	0.
(61) REMMIE MADEN	1.00							-	-	-
DIRECTOR		Х						0.	0.	0.
(62) REUBEN ROBIN	1.00									
DIRECTOR		Х						0.	0.	0.
(63) RICHARD SANDLER	1.00								_	
DIRECTOR		Х						0.	0.	0.
(64) S. ALAN ROSEN	1.00									
DIRECTOR		Х						0.	0.	0.
(65) SANDY SIGAL	1.00								_	
DIRECTOR		Х						0.	0.	0.
	1.00		Ι							
(66) SCOTT TIANO										

Form 990 JEWISH F	EDERATIO	N	CO	UN	CI	L	OF	GREATER LA	95-164	3388
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employe	ees (continued)	
(A)				C)			(D)	(E)	(F)	
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				empl		organization	(W-2/1099-MISC)	from the
	hours for related	ord	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	ll trus		ee/	m pen				organizations
	below	dualt	utiona	_	oldm	stco	-			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) SHAWN EVENHAIM	1.00									
DIRECTOR	1.00	х						0.	0.	0.
(68) STEVE FISHMAN	1.00							•	•	•
DIRECTOR	1.00	Х						0.	0.	0.
(69) STEVEN NICHOLS	1.00	22						0.	0.	<u> </u>
DIRECTOR	1.00	Х						0.	0.	0.
(70) SUSAN BAUM	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(71) SUSIE GOREN	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(72) TERRI SMOOKE	1.00	Λ						0.	0.	0.
	1.00	37							_	•
DIRECTOR	1 00	Х						0.	0.	0.
(73) TODD MORGAN	1.00	.,							_	•
DIRECTOR		Х						0.	0.	0.
			_							
	-		_							
_										
Total to Part VII, Section A, line 1c	<u></u>	<u></u>	<u></u> .	<u></u> .	<u></u> .	<u></u> .	<u></u>			

## Form 990 (2021) JEWISH Part VIII Statement of Revenue

			Check if Schedule O con	ntaine a	resnonse (	or note to any lin	e in this Part VIII			
			Officer if Ochedule O con	itali is a	response (	or note to any iin	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenuè excluded
								function revenue	business revenue	from tax under sections 512 - 514
					<del> </del>					Sections 512 - 514
nts nts	1		Federated campaigns		1a					
iz a			Membership dues		1b	45,820.				
s, C		С	Fundraising events		1c	4,819,650.				
äĤ		d	Related organizations		1d					
Contributions, Gifts, Grants and Other Similar Amounts		е	Government grants (contribu	itions)	1e	3,362,500.				
i Si		f	All other contributions, gifts, gra	nts, and						
but			similar amounts not included abo	ove	1f	35,217,039.				
ÖĘ		g	Noncash contributions included in lines		1g \$	2,163,708.				
Son		_	Total. Add lines 1a-1f			<b>•</b>	43,445,009.			
<u> </u>						Business Code				
Φ.	2	а	PROGRAM SERVICES			900099	134,827.	134,827.		
Š	_	b					, -	, -		
ser ue										
m S		C								
gra Re		d								
Program Service Revenue		e								
-			All other program service rev				124 007			
		g	Total. Add lines 2a-2f				134,827.			
	3		Investment income (including				4 000 045			400004-
			other similar amounts)				1,220,817.			1220817.
	4		Income from investment of ta	ax-exen	npt bond p	roceeds				
	5		Royalties							
				(	i) Real	(ii) Personal				
	6	а	Gross rents6	a 1,	275,369.					
		b	Less: rental expenses 6	<b>b</b> 2,	310,452.					
		С	Rental income or (loss) 6	c -1,	035,083.					
		d	Net rental income or (loss)				-1,035,083.			-1035083.
	7	а	Gross amount from sales of	(i) S	Securities	(ii) Other				
			assets other than inventory 7	a 🖳						
		b	Less: cost or other basis							
<u>o</u>			and sales expenses 71	ь						
her Revenue		_	Gain or (loss) 70							
eve			Net gain or (loss)							
F.			Gross income from fundraising e							
Oth	0	а		9,650.						
٥					- 1					
			contributions reported on line			388,645.				
			Part IV, line 18		I .	360,043.				
			Less: direct expenses			300,203.	28,436.			28,436.
			Net income or (loss) from fun			······	20,430.			20,430.
	9	а	Gross income from gaming a		I .					
			Part IV, line 19							
			Less: direct expenses							
			Net income or (loss) from gar	_		<b></b>				
	10	а	Gross sales of inventory, less							
			and allowances							
		b	Less: cost of goods sold $\dots$		10b					
_		С	Net income or (loss) from sale	es of in	ventory	<u></u>				
s						Business Code				
o o	11	а	REIMBURSEMENTS			900099	145.	145.		
ane		b								
e še		С								
Miscellaneous Revenue		d	All other revenue							
_		е	Total. Add lines 11a-11d			<b>&gt;</b>	145.			
	12		Total revenue. See instructions			<b>)</b>	43,794,151.	134,972.	0.	214,170.

#### Part IX | Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
Secu	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).  Check if Schedule O contains a response or note to any line in this Part IX									
	•	(A)	(B)	(C)	(D)					
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to domestic organizations		ехрепзез	general expenses	ехрепзез					
'	and domestic governments. See Part IV, line 21	21 427 597	21,427,597.							
2	Grants and other assistance to domestic	21,421,331.	21,421,3316							
2		202,969.	202,969.							
3	Grants and other assistance to foreign	202,505.	202,505							
3	<u> </u>									
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16									
4										
4 5	Benefits paid to or for members									
3	trustees, and key employees	2,210,888.	1,206,764.	149,573.	854,551.					
6	Compensation not included above to disqualified	2,210,000	1,200,704.	140,0100	034,3316					
0	persons (as defined under section 4958(f)(1)) and									
7	persons described in section 4958(c)(3)(B)  Other salaries and wages	10,568,706.	5,861,057.	737,879.	3,969,770.					
8	Pension plan accruals and contributions (include	20,300,7000	3,00±,03/•	151,015	3,505,110•					
o	section 401(k) and 403(b) employer contributions)	1,545,749.	698,171.	68,525.	779,053.					
9	Other employee benefits	1,018,307.	459,940.	45,143.	513,224.					
10		1,010,347.	551,642.	52,967.	405,738.					
11	Payroll taxes Fees for services (nonemployees):	-, UIU, UII	331,042.	52,5076	203,730+					
	Management									
	Legal	33,875.	20,342.	5,817.	7,716.					
	Accounting	107,455.	64,527.	18,452.	24,476.					
	Lobbying	61,000.	26,881.	31,017.	3,102.					
	Professional fundraising services. See Part IV, line 17	229,169.	,		229,169.					
f	Investment management fees	113,436.		113,436.						
g	Other. (If line 11g amount exceeds 10% of line 25,	-								
	column (A), amount, list line 11g expenses on Sch O.)	1,953,763.	1,299,296.	424,739.	229,728.					
12	Advertising and promotion	696,314.	467,211.	14,006.	215,097.					
13	Office expenses	227,193.	7,409.	120,767.	99,017.					
14	Information technology	309,305.	12,596.	254,722.	41,987.					
15	Royalties									
16	Occupancy	308,378.	180,860.	69,368.	58,150.					
17	Travel	166,620.	62,784.	44,271.	59,565.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	20 522	14 000	10 555	11.001					
19	Conferences, conventions, and meetings	39,733.	14,972.	10,557.	14,204.					
20	Interest									
21	Payments to affiliates	1 212 070	065 000	251 067	0F 001					
22	Depreciation, depletion, and amortization	1,313,878.	865,920.	351,967.	95,991.					
23	Insurance									
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If									
	line 24e amount exceeds 10% of line 25, column (A),									
_	amount, list line 24e expenses on Schedule 0.)  BAD DEBT EXPENSE	1,210,134.		1,210,134.						
a	SPECIAL EVENT EXPENSE	843,468.	401,719.	32,880.	408,869.					
b c	DUES & SUBSCRIPTIONS	256,512.	113,039.	130,430.	13,043.					
d	CREDIT CARD FEES	250,094.	110,211.	127,166.	12,717.					
	All other expenses	250,034.	19,839.	114,607.	115,565.					
25	Total functional expenses. Add lines 1 through 24e	46,354,901.	34,075,746.	4,128,423.	8,150,732.					
26	Joint costs. Complete this line only if the organization		3 = , 3 , 3 , 7 10 0	_,,	-,					
_0	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									
	· · · · · · · · · · · · · · · · · · ·									

Form **990** (2021)

Form 990 (2021)
Part X Balance Sheet

	LA	balance Sneet					
		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			27,462,043.	1	34,548,112.
	2	Savings and temporary cash investments			8,972,044.	2	577,613.
	3	Pledges and grants receivable, net			8,959,895.	3	5,048,871.
	4	Accounts receivable, net			85,478.	4	129,699.
	5	Loans and other receivables from any current or former officer, director,					
		trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons					
						5	
	6	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons described	l in sect	tion 4958(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net			763,486.	7	442,749.
	8	Inventories for sale or use			8		
Ÿ	9				90,266.	9	413,125.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	49,731,506.			
	b	Less: accumulated depreciation		29,486,080.	19,933,782.	10c	20,245,426.
	11	Investments - publicly traded securities			137,024.	11	44,001.
	12	Investments - other securities. See Part IV, line 1	98,105,276.	12	107,245,534.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			20,651,670.	15	22,170,574.
	16	Total assets. Add lines 1 through 15 (must equa			185,160,964.	16	190,865,704.
	17	Accounts payable and accrued expenses			5,512,513.	17	3,949,617.
	18	Grants payable			14,096,037.	18	14,051,226.
	19	Deferred revenue			278,950.	19	278,950.
	20	Tax-exempt bond liabilities			00 075 070	20	01 601 100
	21	Escrow or custodial account liability. Complete F			20,275,378.	21	21,691,129.
es	22	Loans and other payables to any current or form					
Ħ		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela			2 262 500	23	
	24	Unsecured notes and loans payable to unrelated			3,362,500.	24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	17-24)	. Complete Part X	465,286.	0.5	378,704.
	06	of Schedule D			43,990,664.	25 26	40,349,626.
	26	Total liabilities. Add lines 17 through 25			43,990,004.	26	40,349,020.
S		Organizations that follow FASB ASC 958, che	ck nere				
nce	27	and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions			100,299,300.	27	106,215,078.
ala	28	Net assets with donor restrictions  Net assets with donor restrictions			40,871,000.	28	44,301,000.
D D	20	Organizations that do not follow FASB ASC 9			40,071,000	20	44,301,000.
ᆵ			oo, crie	ck liefe			
<u>p</u>	29	and complete lines 29 through 33.  Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
ŭ						31	
ŝ		Retained earnings, endowment, accumulated income, or other funds				ı JI	1
Net Assets or Fund Balances	31 32	Total net assets or fund balances			141,170,300.	32	150,516,078.

Form **990** (2021)

Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,79</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 35 <sub>°</sub>		
3	Revenue less expenses. Subtract line 2 from line 1	3				50.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	141	,17	0,3	00.
5	Net unrealized gains (losses) on investments	5	11	,90	6,5	<u> 28.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	150	,51	6,0	<u>78.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," 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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" 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?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	-	:			
	Act and OMB Circular A-133?			За		<u> X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		<u></u>
				Form	990	(2021)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

**Employer identification number** Name of the organization JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other vour governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

#### 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	51113230.	<u>51068376.</u>	49127353.	49006357.	43445009.	243760325
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	51113230.	<u>51068376.</u>	49127353.	<u>49006357.</u>	<u>43445009.</u>	243760325
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						0.405.0005
	Public support. Subtract line 5 from line 4.						243760325
	ction B. Total Support	Т		T	ı	Г	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
		51113230.	510683/6.	4912/353.	49006357.	43445009.	243760325
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	1104044	2155020	2270024	2240602	2406106	10406006
	and income from similar sources	1124044.	3155039.	33/0934.	2340603.	2496186.	12486806.
9	Net income from unrelated business						
	activities, whether or not the	1 606		20 025	22 010		40 260
40	business is regularly carried on	4,606.		20,835.	22,919.		48,360.
10	Other income. Do not include gain						
	or loss from the sale of capital	1170337	907 032	520 021	153,424.	300 700	3057604
44	assets (Explain in Part VI.)	11/933/.	007,032.	329,021.	133,424.		259353095
	<b>Total support.</b> Add lines 7 through 10	ata (annimaturatio					,336,179.
	Gross receipts from related activities, First 5 years. If the Form 990 is for the	•	,	fourth or fifth town			,330,173.
13	organization, check this box and stop	-		•			ightharpoonup
Sec	ction C. Computation of Publi	ic Support Per	centage				
	Public support percentage for 2021 (l			column (f))		14	93.99 %
	Public support percentage from 2020					15	94.25 %
	33 1/3% support test - 2021. If the					· ·	
	<b>stop here.</b> The organization qualifies	•				•	
b	33 1/3% support test - 2020. If the						
-	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances te		•	•			▶ □
b	10% -facts-and-circumstances test	-	•	*	-		
	more, and if the organization meets the	_					
	organization meets the facts-and-circle		·		•		
18	<b>Private foundation.</b> If the organization				•		s

Schedule A (Form 990) 2021

#### 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.)

Sec	ction A. Public Support	now, please comp	Diete Fart II.)				
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and		(2, 22.2	(5) = 5 + 5	(-,	(-,	(0)
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
٠	are not an unrelated trade or bus-						
	iness under section 513						
1	Tax revenues levied for the organ-						
-	ization's benefit and either paid to						
	or expended on its behalf						
_							
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge				+	+	
	Total. Add lines 1 through 5				+		
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
D	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	T			T
Cale	ndar year (or fiscal year beginning in) ► 📙	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	e organization's fi	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizatio	on.
	check this box and stop here	· ·			•	. , . ,	. —
Sec	ction C. Computation of Public						
	Public support percentage for 2021 (lin			column (f))		15	%
	Public support percentage from 2020					16	
	etion D. Computation of Invest					1 10 1	
	Investment income percentage for 20			ine 13 column (f)		17	%
	Investment income percentage from 2					18	
	33 1/3% support tests - 2021. If the						
130	more than 33 1/3%, check this box an						, 13 HOL
<b>L</b>	33 1/3% support tests - 2020. If the						
i.	line 18 is not more than 33 1/3%, chec						
20	<b>Private foundation.</b> If the organization						
<b>4</b> U	Filvate iouiluation. Il the organization	i ulu Hol CHECK a	DOX OH HITE 14, 19	ם. טו וטט. נוופנול נו	113 DUX ALIU SEE III	อนนบนบาอ	

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
;	3b		
:	3с		
	4a		
	4b		
	4c		
	5a		
	Ju		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	l0a		
	Ju		
-	l0b		
	(F	~ 000	2001

2024 01-04-21 Schedule A (Form 990) 2021

Did the activities described on line 2a, above, 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.

3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.
- 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.

Schedule A (Form 990) 2021

2b

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Schedule A (Form 990) 2021 JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Page 6

	t V Type III Non-Functionally Integrated 509(a)(3) Support	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
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)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990) 2021

instructions).

Schedule A (Form 990) 2021 JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Page 7

Pai	rt V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continue</sub>	ed)	
Sect	ion D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	;	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3_	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
e	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i_	Carryover from 2016 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
_8_	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
c	Excess from 2019			
d	Excess from 2020			
е	Excess from 2021			

Schedule A (Form 990) 2021

Part VI 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, LINE 10, EXPLANATION FOR OTHER INCOME: GROSS INCOME FROM FUNDRAISING EVENTS 2017 AMOUNT: \$ 1,098,422. 2018 AMOUNT: \$ 745,168. 479,825. 2019 AMOUNT: \$ 2020 AMOUNT: \$ 139,900. 2021 AMOUNT: \$ 388,645. MISCELLANEOUS REVENUE 2017 AMOUNT: \$ 80,915. 2018 AMOUNT: \$ 43,589. 2019 AMOUNT: \$ 49,196. 2020 AMOUNT: \$ 13,524. 2021 AMOUNT: \$ 145. GROSS INCOME FROM GAMING EVENTS 2018 AMOUNT: \$ 18,275.

32028 01-04-22 Schedule A (Form 990) 2021

#### SCHEDULE C (Form 990)

**Political Campaign and Lobbying Activities** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			-	loyer identification number
_	JEWISH	FEDERATION COUNC	IL OF GREATE	ER LA	95-1643388
Pa	art I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		<b>&gt;</b> \$	
Pa	art I-B Complete if the org	anization is exempt und	ler section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	▶ \$	}
	Enter the amount of any excise tax				
	If the organization incurred a section				
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.			=0.1/	\(\alpha\)
Pa	art I-C Complete if the org	anization is exempt und	ler section 501(c),		
	Enter the amount directly expended	, ,	•		
2	Enter the amount of the filing organ				
_	exempt function activities				·
3	Total exempt function expenditures				
4	line 17b				
4 5	Did the filing organization file <b>Form</b> Enter the names, addresses and en				
3	made payments. For each organiza				
	contributions received that were pre-	•			•
	political action committee (PAC). If				
	<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
					1

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Schedule C (Form 990) 2021

f Grassroots lobbying expenditures

## Schedule C (Form 990) 2021 JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b	o)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X X		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?	X	21	61	,000.
	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		.,000.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?		Х		
	Total. Add lines 1c through 1i			61	,000.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
9 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section			tion	
ı aı	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		•		3. is
	answered "Yes."		(,	,	-,
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures. See instructions  t IV Supplemental Information		5		
	• • • • • • • • • • • • • • • • • • • •	" ' D . I	A 11 - 4	10.0	
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (See	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.  RT II-B, LINE 1, LOBBYING ACTIVITIES:				
	ti ii b, lind i, lobbiino neiiviiilb.				
THE	E JEWISH PUBLIC AFFAIRS COMMITTEE OF CALIFORNIA (JPA	C) IS	THE L	ARGEST	ı
SIN	IGLE STATE COALITION OF JEWISH ORGANIZATIONS IN THE	NATION	I. JPA	CIS	
COI	MPRISED OF JEWISH FEDERATIONS, JEWISH COMMUNITY RELA	TIONS	COMMI	TTEES,	
ANI	O OTHER CALIFORNIA BASED JEWISH ORGANIZATIONS. JPAC	TAKES	POSIT	IONS	
ON	LEGISLATION DEALING WITH ISSUES IMPORTANT TO THE JE	WISH C		•	
			Schedu	le C (Form	990) 2021

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Inspection

Name of the organization

JEWISH FEDERATION COUNCIL OF GREATER LA

**Employer identification number** 95-1643388

	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advise	d funds	(b) Funds ar	nd other accou	nts
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 w	riting that the assets he	ld in donor advised fi	ınde		
3	are the organization's property, subject to the organization's e	-			Yes	□ No
6	Did the organization inform all grantees, donors, and donor ad				163	140
Ü	for charitable purposes and not for the benefit of the donor or					
	impermissible private benefit?			-	Yes	☐ No
Pa		anization answered "Ye	s" on Form 990 Part	IV line 7	163	140
1	Purpose(s) of conservation easements held by the organization		5 0111 01111 000, 1 arc	14, 1110 7.		
•	Preservation of land for public use (for example, recreating		Preservation of a hi	istorically impo	ortant land area	
	Protection of natural habitat	lon or education)	Preservation of a co			
	Preservation of open space		] Freservation of a Co	ertinea mstond	Structure	
0	· · ·	ad aanaamiatian aantribi	itian in the form of a	aanaam lation a	accoment on th	a laat
2	Complete lines 2a through 2d if the organization held a qualified day of the tax year.	ed conservation contribi	ation in the form of a		at the End of the	
_					at the Life of the	C TAX TOAT
a						
b	• • • • • • • • • • • • • • • • • • • •	at we be alreaded by (a)				
C	Number of conservation easements on a certified historic stru			2c		
d	\	· ·				
•	listed in the National Register					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or t	erminated by the orga	anization durin	g tne tax	
_	year ▶					
4	Number of states where property subject to conservation ease					
5	Does the organization have a written policy regarding the period	- · ·	· •			<b></b>
_	violations, and enforcement of the conservation easements it					∟ No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, ar	d enforcing conserva	ation easement	s during the ye	ear
_						
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and en	forcing conservation	easements du	ring the year	
_	<b>\$</b>			(D) (1)		
8	Does each conservation easement reported on line 2(d) above	•				<b></b>
_	and section 170(h)(4)(B)(ii)?				Yes	∟ No
9	In Part XIII, describe how the organization reports conservatio		•			
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's	financial statements	that describes	the	
Da	organization's accounting for conservation easements.  rt III   Organizations Maintaining Collections of	Art Historical Tro	acurae or Othor	· Similar Ac	cotc	
Га			asures, or Other	Silliliai As	3 <del>0</del> 13.	
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 958	·				
	of art, historical treasures, or other similar assets held for publ			rance of public		
	service, provide in Part XIII the text of the footnote to its finance					
b	If the organization elected, as permitted under FASB ASC 958					
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtherar	nce of public s	ervice,	
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
2	If the organization received or held works of art, historical trea	sures, or other similar a	ssets for financial gai	n, provide		
	the following amounts required to be reported under FASB AS	~				
а	Revenue included on Form 990, Part VIII, line 1					
<u>b</u>	Assets included in Form 990, Part X			> \$		
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Sche	edule D (Form	990) 2021

132051 10-28-21

Schedule D (Form 990) 2021

	RATION COUNCIL	OF GREATER LA 95	-1643388 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) JEWISH COMMUNITY			
(B) FOUNDATION COMMON			
(C) INVESTMENT POOL	107,245,534.	END-OF-YEAR MARKET	VALUE
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	107,245,534.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) DUE FROM BROKER			191,692.
(2) JIM JOSEPH FUND HSAI			21,691,129.
(3) DEFERRED COMPENSATION 457	(B)		245,541.
(4) OTHER ASSETS	· ,		42,212.
(5)			,
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	e 15.)	<b>&gt;</b>	22,170,574.
Complete if the organization answered "Yes"	on Form 990, Part IV. line 1	1e or 11f. See Form 990. Part X. line 25.	
1. (a) Description of liability	,	,,	(b) Book value
			• • • • • • • • • • • • • • • • • • • •

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SECURITY DEPOSITS	38,640.
(3) DEFERRED COMPENSATION 457(B) PLAN	245,541.
(4) DEFINED BENEFIT PENSION PLAN	90,428.
(5) OTHER LIABILITIES	4,095.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	378,704.

<sup>2.</sup> 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2021

# FEDERATION ACTS AS INTERMEDIARY BETWEEN THE BJE AND THE FOUNDATION BY TRANSFERRING FUNDS RECEIVED BY BJE FROM THE HIGH SCHOOLS FOR INVESTING IN

THE COMMON INVESTMENT POOL MANAGED BY THE FOUNDATION.

THE BOARD DESIGNATED ENDOWMENT IS INTENDED TO PROVIDE ONGOING SUPPORT FOR THE ORGANIZATION THROUGH AN ANNUAL DISTRIBUTION. THE ANNUAL DISTRIBUTION IS BASED ON A SPENDING RATE OF 5% CALCULATED BASED ON THE TWELVE QUARTERS AVERAGE BALANCE AT SEPTEMBER 30TH. ADDITIONALLY, THE BOARD DESIGNATED ENDOWMENT MAY BE USED TO SUPPORT SIGNIFICANT OPERATING OR PROGRAM INITIATIVES THAT EXCEED THE PROJECTED ANNUAL REVENUE AND EXPENSE BUDGET. DISTRIBUTIONS THAT EXCEED THE ANNUAL SPENDING RATE ARE APPROVED BY THE BOARD. OTHER ENDOWMENT FUNDS ARE INTENDED TO A) MATCH AREA JEWISH DAY SCHOOLS SCHOLARSHIP DISTRIBUTIONS, B) PROVIDE FOR CAPITAL IMPROVEMENTS TO

THE FEDERATION'S FACILITIES, C) MAINTAIN WOMENS' LION OF JUDAH GIFTS IN

PERPETUITY AND SUPPORT WOMEN'S PHILANTHROPY, AND D) SUPPORT THE

FEDERATION'S ANNUAL CAMPAIGN IN PERPETUITY.

PART X, LINE 2:

THE FEDERATION IS 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, RESPECTIVELY. ADDITIONALLY, THE FEDERATION HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE REPORTING OR DISCLOSURE IN THE FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2021.

THE FEDERATION'S FEDERAL AND STATE INCOME TAX RETURNS PRIOR TO 2018 AND 2017, RESPECTIVELY, ARE CLOSED AND MANAGEMENT CONTINUALLY EVALUATES EXPIRING STATUTES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW AND NEW AUTHORITATIVE RULINGS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE

-1,210,134.

Schedule D (Form 990) 2021 JEWISH FEDERATION COUNCIL OF GREATER LA  Part XIII Supplemental Information (continued)	95-1643388 Page 5
ROUNDING (AUDIT NUMBERS ARE ROUNDED TO THE NEAREST	
THOUSAND)	1,393.
BANK CHARGES	-3,104.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-1,211,845.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
RENT REVENUE	1,275,367.
EVENT REVENUE	249,481.
FUNDRAISING EXPENSES	
RENTAL EXPENSES	-2,310,450.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-785,602.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	2,310,451.
RENTAL REVENUE	-1,275,367.
FUNDRAISING EXPENSES	
EVENT REVENUE	-249,481.
ROUNDING (AUDIT NUMBERS ARE ROUNDED TO THE NEAREST	
THOUSAND)	1,170.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	786,773.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
BAD DEBT EXPENSE	1,210,134.
BANK CHARGES	3,104.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,213,238.

#### SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

### **Statement of Activities Outside the United States**

 $\blacktriangleright$  Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

Employer identification number

varie of the organization					Employer lacitum	
					95-1643388	
		ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	es" on
Form 990, Part IV						
<del>-</del>	-		ds to substantiate the amount of its gra			
the grantees' eligibility fo	or the grants or a	issistance, and t	he selection criteria used to award the	grants or assis	tance?	Yes No
	ribe in Part V the	organization's p	procedures for monitoring the use of its	grants and oth	ner assistance outsi	de the
United States.						
			In be duplicated if additional space is n		it listed in (d)	(f) Total
(a) Region	(b) Number of offices	employees, agents, and	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in (d) gram service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to		specific type	for and
		contractors	recipients located in the region)		(s) in the region	investments in the region
ITDDIE EXCE AND		in the region	-	COMMUNITARY T	EADED GUTD	in the region
HIDDLE EAST AND				COMMUNITY L		
ORTH AFRICA -					RIP FOR JOINT	
LGERIA, BAHRAIN,	0	2.4	DDOGDAN GEDVITGEG	SEMINAR IN		010 024
DJIBOUTI, EGYPT,	0	34	PROGRAM SERVICES	OTHER MISSI		818,234.
CUROPE (INCLUDING				PROGARM MIS		
CELAND & GREENLAND)					THE WORK OF	
ALBANIA, ANDORRA,	0	E	DDOCDAM GEDVICEG	OTHER NON-P		202 222
USTRIA, BELGIUM	U	5	PROGRAM SERVICES	ORGANIZATIO	NP	382,222.
<b>3 a</b> Subtotal	0	39				1,200,456.
<b>b</b> Total from continuation		33				_,,
sheets to Part I	0	0				0.
c Totals (add lines 3a						

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

Schedule F (Form 990) 2021

1,200,456.

Schedule F (Form 990) 2021

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								

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

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.							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

# Schedule F (Form 990) 2021 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "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)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "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)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "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)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "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)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "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)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "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)	Yes	X No

#### SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

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

JEWISH FEDERATION COUNCIL OF GREATER LA

Employer identification number 95-1643388

Part I Fundraising Activities required to complete this part	<ul> <li>Complete if the organization answ</li> <li>t.</li> </ul>	wered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
<ul> <li>1 Indicate whether the organization rais a X Mail solicitations</li> <li>b X Internet and email solicitations</li> <li>c X Phone solicitations</li> <li>d X In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, F</li> <li>b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the</li> </ul>	e X Solici f X Solici g X Speci  or oral agreement with any individu Part VII) or entity in connection with viduals or entities (fundraisers) pure	tation of tation of ial fundra al (includ professi	non-g gover ising ling of onal fu	overnment grants nment grants events fficers, directors, trus undraising services?	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
MICHAEL EPSTEIN SPORTS	TOUR DE SUMMER CAMP -	Yes	No			
PRODUCTIONS, INC 29395	BICYCLING FUNDRAISER	Х		460,640.	175,000.	285,640.
SIEGEL MARKETING GROUP INC 1845 N. FARWELL AVE. SUITE	TELE-FUNDRAISING		х	203,219.	54,169.	149,050.
Total				663,859.	229,169.	434,690.
List all states in which the organization or licensing.  CA	on is registered or licensed to solici		utions			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SEE PART IV FOR CONTINUATIONS

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			REC DINNER /			(add col. (a) through
			BREAKFAST	SERVICES DIN	7	col. <b>(c)</b> )
۵			(event type)	(event type)	(total number)	351. <b>(5</b> )/
Revenue						
e Se	1	Gross receipts	418,369.	593,100.	4,196,826.	5,208,295.
"						
	2	Less: Contributions	333,728.	449,708.	4,036,214.	4,819,650.
	3	Gross income (line 1 minus line 2)	84,641.	143,392.	160,612.	388,645.
	4	Cash prizes				
,,	5	Noncash prizes				
Direct Expenses	_	Doob/fooiliby cooks				
ber	6	Rent/facility costs				
印	7	Food and houseness	16,316.	84,973.	168,802.	270,091.
<u>.e</u>	′	Food and beverages	10,510.	01,575.	100,002.	270,051.
의	8	Entertainment				
	9	Other direct expenses		21,277.	67,039.	90,118.
	_	Direct expense summary. Add lines 4 through		==,=,,,,	,	360,209.
		Net income summary. Subtract line 10 from lin			_	28,436.
Pa	rt I	II Gaming. Complete if the organization a				
		\$15,000 on Form 990-EZ, line 6a.				
<sub>a</sub>			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4) 5.1190	bingo/progressive bingo	(b) Surior garming	col. (a) through col. (c))
Š						
	1	Gross revenue				
es	2	Cash prizes				
eus	•	Nanagah prizas				
Direct Expenses	3	Noncash prizes				
섫	1	Rent/facility costs				
Ë	-	Tiern/lacinty costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	
		ter the state(s) in which the organization condu	_			
		he organization licensed to conduct gaming ac				Yes No
b	If "	No," explain:				
40	<u></u>		contract on the state of	material I to the state of	0	
		ere any of the organization's gaming licenses re			ear?	Yes No
D	If "	Yes," explain:				
	_					

132082 10-21-21 Schedule G (Form 990) 2021

Schedule G (Form 990) 2021 JEWISH FEDERATION COUNCIL OF GREATER LA 95-2	<u> 1643388</u>	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	No
13 Indicate the percentage of gaming activity conducted in:	1 1	
a The organization's facility	13a	<u>%</u>
<b>b</b> An outside facility	13b	<u>%</u>
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name ▶		
Address		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount		
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address of the third party:		
Name ▶		
Address >		
16 Gaming manager information:		
Name ▶		
Gaming manager compensation > \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	· L Yes	└── No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year \( \bigsip \) \\$ <b>Part IV Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III lings 0 (	2h 10h
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	11 111, 111165 5, 3	50, 100,
Tob, 166, 16, and 176, as applicable. Also provide any additional information. God metractions.		
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	3:	
(I) NAME OF FUNDRAISER: MICHAEL EPSTEIN SPORTS PRODUCTIONS, INC.		
(1) NAME OF FUNDATISER: MICHAEL EFSIEIN SPORTS PRODUCTIONS, INC.		
(I) ADDRESS OF FUNDRAISER:		
29395 AGOURA ROAD SUITE 102, AGOURA HILLS, CA 91301		
(I) NAME OF FUNDRAISER: SIEGEL MARKETING GROUP INC.		
(I) ADDRESS OF FUNDRAISER:		
1845 N. FARWELL AVE. SUITE 300, MILWAUKEE, MI 53202		

Schedule G (Form 990) JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Page 4  Part IV Supplemental Information (continued)
, comments
ADDITIONAL INFORMATION - TOUR DE SUMMER CAMP
SINCE THE TOUR DE SUMMER CAMP FUNDRAISER EVENT IS AS MUCH ABOUT
AWARENESS BUILDING AS FUNDRAISING, MANAGEMENT DECIDED THAT NET PROFIT
WAS AN ACCEPTABLE RATIO.
WAS AN ACCEPTABLE RATIO:

#### 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.

2021
Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

JEWISH FEDERATION COUNCIL OF GREATER LA

Employer identification number
95-1643388

General Information on Grants an	d Assistance						
ne organization maintain records to	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	on
used to award the grants or assist	ance?						X Yes No
oe in Part IV the organization's pro	cedures for monit	oring the use of grant	funds in the United	States.			
					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
ecipient that received more than \$	5,000. Part II can	be duplicated if additi	onal space is neede	ed.		_	
ne and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
FTER							
•							
S, CA 90067	26-1748436	501(C)(3)	40,000.	0.			GRANT EXPENSE
SHUA HESCHEL DAY SCHOOL INSHIRE STREET 1, CA 91325	95-2794822	501(C)(3)	96,681.	0.			STUDENT FINANCIAL AID
EL NANK BLVD. LLAGE, CA 91607-2198	23-7366318	501(C)(3)	68,108.	0.			GRANT EXPENSE/STUDENT FINANCIAL AID
AH CH LN S, CA 90049	20-1000739	501(C)(3)	36,323.	0.			GRANT EXPENSE
OF LOS ANGELES THIRD STREET S, CA 90036	90-0086051	501(C)(3)	75,000.	0.			GRANT EXPENSE
S COMMUNITY CENTER TH. STREET S. CA 90011	95-2669400	501(C)(3)	50,000.	0.			GRANT EXPENSE
	ne organization maintain records to used to award the grants or assist used in Part IV the organization's processor and the grants and Other Assistance to Decipient that received more than \$ ne and address of organization or government  FTER RY PARK EAST, SUITE #2140 S, CA 90067  SHUA HESCHEL DAY SCHOOL NSHIRE STREET , CA 91325  L ANK BLVD. LAGE, CA 91607-2198  AH CH LN S, CA 90049  OF LOS ANGELES THIRD STREET S, CA 90036  S COMMUNITY CENTER H. STREET	used to award the grants or assistance?	ne organization maintain records to substantiate the amount of the grants used to award the grants or assistance?  be in Part IV the organization's procedures for monitoring the use of grant frants and Other Assistance to Domestic Organizations and Domestic ecipient that received more than \$5,000. Part II can be duplicated if additione and address of organization or government  (b) EIN  (c) IRC section (if applicable)  (f) FTER  RY PARK EAST, SUITE #2140  S, CA 90067  26-1748436  501(C)(3)  SHUA HESCHEL DAY SCHOOL  NSHIRE STREET  , CA 91325  95-2794822  501(C)(3)  L  ANK BLVD.  LAGE, CA 91607-2198  23-7366318  501(C)(3)  AH  CH LN  S, CA 90049  20-1000739  501(C)(3)  OF LOS ANGELES  THIRD STREET  S, CA 90036  90-0086051  501(C)(3)	ne organization maintain records to substantiate the amount of the grants or assistance, the guesed to award the grants or assistance?  Dee in Part IV the organization's procedures for monitoring the use of grant funds in the United Grants and Other Assistance to Domestic Organizations and Domestic Governments. Conception that received more than \$5,000. Part II can be duplicated if additional space is needed and address of organization or government.  (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant cash gr	ne organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility used to award the grants or assistance?  De in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Trants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization and comments of the grant that received more than \$5,000. Part II can be duplicated if additional space is needed.  The and address of organization or government  The analysis of the grants of organization or government  The analysis of the grants	ne organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance to award the grants or assistance?  Ne in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Strants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Necipient that received more than \$5,000. Part II can be duplicated if additional space is needed.  In eand address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant (e) Amount of noncash assistance (f) Method of valuation (book, FMV, appraisal, other)  FTER  RY PARK EAST, SUITE \$2140  S, CA 90067 26-1748436 \$01(C)(3) 40,000. 0.  SHUA HESCHEL DAY SCHOOL  NSHITE STREET  , CA 91325 95-2794822 \$01(C)(3) 96,681. 0.  LA  ANK BLVD.  LABGE, CA 91607-2198 23-7366318 \$01(C)(3) 68,108. 0.  AH  CH LN  S, CA 90049 20-1000739 \$01(C)(3) 36,323. 0.  OF LOS ANGELES  THIRD STREET  S, CA 90036 90-0086051 \$01(C)(3) 75,000. 0.  S COMMUNITY CENTER  H. STREET	The organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selections of the award the grants or assistance?  Les in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Learnest and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part eligibility for the grants or assistance, and the selection of the procedures for monitoring the use of grant funds in the United States.  Learnest and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part eligibility for the grants or assistance assistance or Formation answered "Yes" on Form 990, Part eligibility for the grants or assistance in Formation answered "Yes" on Form 990, Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or assistance in Formation and Part eligibility for the grants or elig

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

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN JEWISH JOINT DISTRIBUTION							
COMMITTEE - 220 EAST 42ND STREET,							CAMPERSHIPS/SCHOLARSHIPS/
SUITE 400 - NEW YORK, NY 10017	13-1656634	501(C)(3)	88,000.	0.			TIPENDS/GRANT EXPENSE
AMERICAN JEWISH UNIVERSITY							
15600 MULHOLLAND DRIVE							CAMPERSHIPS/SCHOLARSHIPS/
LOS ANGELES, CA 90077	95-1684064	501(C)(3)	231,030.	0.			TIPENDS/GRANT EXPENSE
AT THE WELL, INC.							
AT THE WELL, INC. SARAH WAXMAN							
WASHINGTON, DC 20016	83-2697895	501(C)(3)	40,000.	0.			GRANT EXPENSE
BAIS CHAYA MUSHKA SCHOOL OF LOS							
ANGELES - 9051 W. PICO BLVD LOS							
ANGELES, CA 90035	95-4439460	501 (C) (3)	36,783.	0.			STUDENT FINANCIAL AID
modeles, en 30033	33 4433400	301(0)(3)	30,703.	· ·			DIODENI TIMMCIME MID
BEHRMAN HOUSE INC							
241B MILLBURN AVE							
MILLBURN, NJ 07041	22-2664797	501(C)(3)	6,892.	0.			PROGRAM SUPPLIES/BOOKS
BEIT T'SHUVAH							
8985 VENICE BLVD. SUITE H							
LOS ANGELES, CA 90034	77-0152646	501(C)(3)	130,000.	0.			GRANT EXPENSE
BETH SHIR SHALOM							
1827 CALIFORNIA AVENUE							
SANTA MONICA, CA 90403	95-1551433	501(C)(3)	8,000.	0.			STUDENT FINANCIAL AID
·							
BET TZEDEK LEGAL SERVICES							
3250 WILSHIRE BLVD., 13TH FLOOR							
LOS ANGELES, CA 90010-1509	23-7304205	501(C)(3)	345,000.	0.			PROGRAM SUPPLIES/BOOKS
BIRTHRIGHT ISRAEL FOUNDATION							
33 EAST 33RD STREET, 7TH FLOOR							
NEW YORK , NY 10016	13-4092050	501(C)(3)	801,657.	0.			GRANT EXPENSE

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- 101000 Tugo T
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B'NAI DAVID JUDEA							
8906 W PICO BLVD.							
LOS ANGELES, CA 90035-3304	95-1916023	501(C)(3)	10,000.	0.			GRANT EXPENSE
BNEI AKIVA OF LOS ANGELES							
1101 S. ROBERTSON BLVD., SUITE 105							CAMPERSHIPS/SCHOLARSHIPS/S
LOS ANGELES, CA 90035	26-2103488	501(C)(3)	76,802.	0.			TIPENDS/GRANT EXPENSE
·			·				
BORNE PARTNERS LLC							
16101 VENTURA BLVD, STE 230							
ENCINO, CA 91436	46-5276027	501(C)(3)	12,705.	0.			PROGRAM SUPPLIES/BOOKS
DRAMEDWAN DI ENTINDADIV GOMOOT							
BRAWERMAN ELEMENTARY SCHOOL							
11661 W. OLYMPIC BLVD.	95-1691339	E01/G)/2)	E1 270	0.			STUDENT FINANCIAL AID
LOS ANGELES, CA 90064	95-1091339	501(C)(3)	51,270.	0.			STUDENT FINANCIAL AID
BUILDERS OF JEWISH EDUCATION							
6505 WILSHIRE BLVD., STE. 300							
LOS ANGELES, CA 90048	95-4280178	501(C)(3)	666,554.	0.			GRANT EXPENSE
,			,				
BUTTONED UP PRODUCTIONS LLC							
1524 N 8TH ST. UNIT 3							
PHILADELPHIA, PA 19122	84-2749057	501(C)(3)	35,001.	0.			PROGRAM SUPPLIES/BOOKS
BURBANK TEMPLE EMANU EL							
1302 N. GLENOAKS BLVD.	05.4606505	504 (5) (0)					
BURBANK, CA 91504	95-1696705	501(C)(3)	6,000.	0.			STUDENT FINANCIAL AID
CAMP MOUNTAIN CHAI							
5249 SOUTH SEPULVEDA BLVD.							
CULVER CITY, CA 90230	91-2150831	501(C)(3)	18,200.	0.			CAMPERSHIPS
32.2. 3111, 311 30200	31 2130001	202(0)(0)	10,200.	-			
CAMP RAMAH IN CALIFORNIA, INC.							
4950 MURPHY CANYON ROAD							CAMPERSHIPS/SCHOLARSHIPS/S
SAN DIEGO, CA 92123	95-1843131	501(C)(3)	247,740.	0.			TIPENDS/GRANT EXPENSE

(a) Name and address of	(L) [N]	(-) IDO ti	(4) A	(-) A	(C) Mada ada 6	(a) December of	(1-) Down a confirmation
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMP TAWONGA							
L7525 VENTURA BLVD. STE. 310							
ENCINO, CA 91316	94-3227261	501(C)(3)	11,500.	0.			CAMPERSHIPS
•			,				
CASHSTAR, INC.							
131 STEUART STREET, STE. 460							
SAN FRANCISCO, CA 94105	03-0395352	501(C)(3)	340,560.	0.			SCHOLARSHIPS/STIPENDS
CENTER FOR ASIAN AMERICANS UNITED							
FOR SELF EMPOWERMENT - 1605 W.							
OLYPMIC BLVD. SUITE 1027 - LOS							
ANGELES, CA 90015	95-4458597	501(C)(3)	50,000.	0.			GRANT EXPENSE
CHABAD AT CSUN							
17833 PRAIRIE STREET							
NORTHRIDGE, CA 91325	20-8117991	501(C)(3)	20,000.	0.			GRANT EXPENSE
CHABAD JEWISH CENTER DBA GAN WEST							
PRESCHOOL - 12053 JEFFERSON BLVD -				_			
CULVER CITY, CA 90230	95-4836001	501(C)(3)	6,000.	0.			STUDENT FINANCIAL AI
GUADAD AM HOG							
CHABAD AT USC 2713 SEVERANCE ST.							
LOS ANGELES, CA 90007	61-1442258	501/01/31	35,000.	0.			GRANT EXPENSE
LOS ANGELES, CA 90007	01-1442250	501(0)(3)	33,000.	0.			GRANI EAFENSE
CHABAD OF SANTA MONICA COLLEGE							
1428 17TH ST.							
SANTA MONICA, CA 90404	95-4867184	501(C)(3)	20,000.	0.			GRANT EXPENSE
,		,					
CHAI LIFELINE							
151 W 30TH STREET							
NEW YORK, NY 10001	11-2940331	501(C)(3)	185,000.	0.			GRANT EXPENSE
-							
CHALLAH FOR HUNGER							
1701 WALNUT STREET, 7TH FLOOR							
PHILADELPHIA, PA 19103	26-1540827	501(C)(3)	15,000.	0.			GRANT EXPENSE

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(b) Liiv	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
CHAYA COMMUNITY							
750 N SAN VICENTE BLVD, 800 WEST							
WEST HOLLYWOOD, CA 90069	83-1425288	501(C)(3)	21,500.	0.			GRANT EXPENSE
		(-,(-,					
CHEDER MENACHEM MENDEL							
1606 S. LA CIENEGA BLVD.							
LOS ANGELES, CA 90035	95-4434095	501(C)(3)	72,919.	0.			STUDENT FINANCIAL AID
CHOFETZ CHAIM LOS ANGELES							
AFFILIATE - 1540 S. ROBERTSON							
BLVD LOS ANGELES, CA 90035	27-1887722	501(C)(3)	20,834.	0.			STUDENT FINANCIAL AID
CONGREGATION BETH SHALOM							
21430 CENTRE POINTE PARKWAY							
SANTA CLARITA, CA 91350	95-3127094	501(C)(3)	6,000.	0.			STUDENT FINANCIAL AID
CONGREGATION NER ARYEH							
12422 CHANDLER BLVD.				_			
VALLEY VILLAGE, CA 91607	81-3930468	501(C)(3)	10,419.	0.			STUDENT FINANCIAL AID
CROSS CULTURAL EXPRESSIONS							
15315 MAGNOLIA BLVD. #400							
SHERMAN OAKS, CA 91403	47-2372275	501(C)(3)	25,000.	0.			GRANT EXPENSE
BIERMAN OARD, CA 91403	47 2372273	501(0/(3/	25,000.	<u> </u>			GRANI ERIENDE
DE TOLEDO HIGH SCHOOL							
22622 VANOWEN STREET							
WEST HILLS, CA 91307	95-4805188	501(C)(3)	169,274.	0.			STUDENT FINANCIAL AID
,							
EDEN VILLAGE CAMP							
3200 RIO LINDO AVE							
HEALDSBURG, CA 95448	26-4373931	501(C)(3)	10,600.	0.			CAMPERSHIPS
EMEK HEBREW ACADEMY							
5850 LAUREL CANYON BLVD.							
NORTH HOLLYWOOD, CA 91607	95-6006492	501(C)(3)	104,128.	0.			STUDENT FINANCIAL AID

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETTA ISRAEL CENTER							
15365 MAGNOLIA BLVD.	05 4200644	504 (5) (0)		•			
SHERMAN OAKS, CA 91403	95-4308644	501(C)(3)	380,000.	0.			GRANT EXPENSE
FAITH AND COMMUNITY EMPOWERMENT							
13034 SATICOY ST.							
NORTH HOLLYWOOD, CA 91605	03-0417254	501(C)(3)	50,000.	0.			GRANT EXPENSE
·			,				
FOUNDATION FOR JEWISH CAMP, INC.							
3550 WILSHIRE BLVD. #1124							
LOS ANGELES, CA 90010	22-3551013	501(C)(3)	40,000.	0.			GRANT EXPENSE
FRIENDS OF ISRAEL SCOUTS INC.							
253 WEST 35TH STREET, 4TH FLOOR							
NEW YORK, NY 10001	13-3843506	501(C)(3)	40,000.	0.			GRANT EXPENSE
FRIENDSHIP CIRCLE LOS ANGELES							
575 8TH AVENUE 11TH FLOOR	20-3270890	E01/Q\/3\	140 000	0			CDANIE EXPENSE
NEW YORK, NY 10018	20-32/0890	501(0)(3)	140,000.	0.			GRANT EXPENSE
GAN ISRAEL SCHOOL							
1952 S. ROBERTSON BLVD.							
LOS ANGELES, CA 90034	95-3981217	501(C)(3)	22,000.	0.			STUDENT FINANCIAL AID
•			<u> </u>				
GINDI MAIMONIDES ACADEMY							
18181 BURBANK BLVD							
TARZANA, CA 91356	95-3214146	501(C)(3)	102,919.	0.			STUDENT FINANCIAL AID
HABONIM CAMP KVUTZA INC.							
8511 BEVERLY PLACE							SCHOLARSHIPS/STIPENDS/GRA
LOS ANGELES, CA 90048	95-1929706	501(C)(3)	22,130.	0.			T EXPENSE
HABONIM DROR CAMP GILBOA							
8339 W. 3RD ST.	05 1000505	E01/G)/2)	12.012	_			CAMPERSHIPS/SCHOLARSHIPS/
LOS ANGELES, CA 90048	95-1929706	DOT(C)(2)	43,840.	0.			TIPENDS/GRANT EXPENSE

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARKHAM HILLEL HEBREW ACADEMY							
8339 W. 3RD ST.							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90048	95-1662972	501(C)(3)	128,543.	0.		1	FINANCIAL AID
HEART OF LOS ANGELES YOUTH, INC.							
9120 WEST OLYMPIC BLVD.							
BEVERLY HILLS, CA 90212	95-4397418	501(C)(3)	50,000.	0.			GRANT EXPENSE
HILA BETTY GELFER							
2701 WILSHIRE BLVD., SUITE 100							
LOS ANGELES, CA 90057	68-8847994	501(C)(3)	10,000.	0.			SCHOLARSHIPS/STIPENDS
HILLEL 818							
17729 PLUMMER ST							
NORTHRIDGE, CA 91325	95-1831070	501(C)(3)	130,000.	0.			GRANT EXPENSE
·			,				
HILLEL AT UCLA							
574 HILGARD AVENUE							
LOS ANGELES, CA 90024	46-0573247	501(C)(3)	150,000.	0.			GRANT EXPENSE
IKAR							
1564 SOUTH BURNSIDE AVENUE							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90019	20-1210098	501(C)(3)	23,000.	0.			FINANCIAL AID
TIAN DAMON DAY GOUGO							
ILAN RAMON DAY SCHOOL							
27400 W. CANWOOD STREET	95-4661185	501(0)(3)	62.004	0			CHILDENIM ETNIVNOTVI VT
AGOURA HILLS, CA 91301	33-4001185	501(0)(3)	62,084.	0.			STUDENT FINANCIAL AII
IMAGINATION PRODUCTIONS INC.							
11110 W OAKLAND PARK BLVD #288							
SUNRISE, FL 33351	26-1264680	501(C)(3)	33,500.	0.			GRANT EXPENSE
	20 1201000		33,300.	٠.			
IRANIAN AMERICAN JEWISH FEDERATION							
1317 N. CRESCENT HEIGHTS BLVD.							
WEST HOLLYWOOD, CA 90046	95-3618582	501(C)(3)	25,000.	0.			GRANT EXPENSE

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JADEN LEVINSON							
11150 W. OLYMPIC BLVD. SUITE 900							
LOS ANGELES, CA 90064	60-8311774	501(C)(3)	15,000.	0.			SCHOLARSHIPS/STIPENDS
JEWISH BIG BROTHERS BIG SISTERS							
2108 VAIL AVE.							
REDONDO BEACH, CA 90278	95-1691009	501(C)(3)	306,497.	0.			GRANT EXPENSE
JEWISH COMMUNITY CENTER OF THE							
SOUTH BAY - 6505 WILSHIRE BLVD							
LOS ANGELES, CA 90048	71-0866033	501(C)(3)	26,000.	0.			STUDENT FINANCIAL AID
JEWISH COMMUNITY FOUNDATION							
116 E. 27TH STREET, 10TH FLOOR							
NEW YORK, NY 10016	95-6111928	501(C)(3)	340,239.	0.			GRANT EXPENSE
JEWISH COUNCIL FOR PUBLIC AFFAIRS							
330 NORTH FAIRFAX AVENUE							
LOS ANGELES, CA 90036	13-1624104	501(C)(3)	96,100.	0.			GRANT EXPENSE
,			, , , , , , , , , , , ,				
JEWISH FAMILY SERVICE OF LOS							
ANGELES - 6505 WILSHIRE BLVD., 7TH							
FL LOS ANGELES, CA 90048	95-1691013	501(C)(3)	3,639,974.	0.			GRANT EXPENSE
JEWISH FREE LOAN 9315 ALCOTT STREET STE. 201							
LOS ANGELES, CA 90035	95-1691014	501 (C) (3)	321,250.	0.			GRANT EXPENSE
LOD IMODELLO, CIL 30033	73 1031014	301(0)(3)	321,230.	•••			CREAT DATEMON
JEWISH GRADUATE STUDENT INITIATIVE							
1856 N NOB HILL ROAD, #219							
PLANTATION, FL 33322	80-0716359	501(C)(3)	50,000.	0.			GRANT EXPENSE
THAT GILL THIMBD A CHITTE THE							
JEWISH INTERACTIVE INC. 6505 WILSHIRE BLVD. SUITE 450							
LOS ANGELES, CA 90048	46-1331618	501(C)(3)	35,000.	0.			GRANT EXPENSE
LOS ILIGHES, CA 70040	1 40 1221010	301/0/(3/	33,000.	0.			DIVINI ENLENDE

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH LOS ANGELES SPECIAL NEEDS							
TRUST - 2005 MARBLE GORGE DRIVE -							
LAS VEGAS, NV 89117	81-0820016	501(C)(3)	20,000.	0.			GRANT EXPENSE
			, -				
JEWISH SOCIAL RESPONSE							
6505 WILSHIRE BLVD., SUITE 200							
LOS ANGELES, CA 90048	46-4634663	501(C)(3)	15,000.	0.			GRANT EXPENSE
JEWISH VOCATIONAL SERVICE							
3435 OCEAN PARK BLVD. #107-85							
SANTA MONICA, CA 90405	95-1691012	501(C)(3)	417,046.	0.			GRANT EXPENSE
JEWISH WOMEN'S THEATRE							
801 LARRABEE ST., #10	45 4455550	504 (5) (0)	10.000				
WEST HOLLYWOOD, CA 90069	47-4157778	501(C)(3)	10,000.	0.			GRANT EXPENSE
JQ INTERNATIONAL							
7011 SHOUP AVENUE							
WEST HILLS, CA 91307	68-0601176	501(C)(3)	113,500.	0.			GRANT EXPENSE
WEET HILLE, CH 3100,	33 3331173	301(0)(3)	113,300.	•			
KADIMA HEBREW ACADEMY							
1434 N. ALTADENA DR.							GRANT EXPENSE/STUDENT
PASADENA, CA 91107	95-3190850	501(C)(3)	52,172.	0.			FINANCIAL AID
·							
KARNA BLUGRIND							
1779 KIRBY PKWY I-362							
MEMPHIS, TN 38138	95-3643872	501(C)(3)	10,000.	0.			STUDENT FINANCIAL AID
KAVOD/ENSURING DIGNITY FOR							
HOLOCAUST SURVIVORS - 16019 WEST							
SUNSET BLVD PACIFIC PALISADES,							
CA 90272	47-5495289	501(C)(3)	98,000.	0.			GRANT EXPENSE
KEHILLAT ISRAEL							
200 EAST SLAUSON AVE							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90011	95-2056645	501(C)(3)	11,000.	0.			FINANCIAL AID

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOS ANGELES BROTHERHOOD							
CRUSADE-BLACK UNITED FUND INC							
12020 BURBANK BLVD VALLEY							
VILLAGE, CA 91607	95-2543819	501(C)(3)	50,000.	0.			GRANT EXPENSE
LOS ANGELES HEBREW HIGH SCHOOL							
PO BOX 2988							
LOS ANGELES, CA 90078-2988	95-1644595	501(C)(3)	10,000.	0.			GRANT EXPENSE
LOS ANGELES LGBT CENTER							
100 S. THE GROVE DRIVE							
LOS ANGELES, CA 90036	95-3567895	501(C)(3)	75,000.	0.			GRANT EXPENSE
LOS ANGELES MUSEUM OF THE							
HOLOCAUST - 1 LMU DRIVE MALONE 301							
- LOS ANGELES, CA 90045	46-0503824	501(C)(3)	42,000.	0.			GRANT EXPENSE
200 12002220, 021 00010			12,555.				
MALIBU JEWISH CENTER & SYNAGOGUE							
24855 PACIFIC COAST HIGHWAY							
MALIBU, CA 90265	95-3514894	501(C)(3)	30,000.	0.			GRANT EXPENSE
MAPS CHARITIES							
14320 VENTURA BLVD. #331	0	504 (5) (0)					
SHERMAN OAKS, CA 91423	27-0749461	501(C)(3)	20,000.	0.			GRANT EXPENSE
MESIVTA OF GREATER LOS ANGELES							
25115 MUREAU RD.							 GRANT EXPENSE/STUDENT
CALABASAS, CA 91302	95-4621495	501(C)(3)	36,042.	0.		1	FINANCIAL AID
·			·				
MILKEN COMMUNITY SCHOOL							
15800 ZELDINS WAY							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90049	95-4381008	501(C)(3)	221,593.	0.			FINANCIAL AID
MOTQUE HOUGE							
MOISHE HOUSE							
441 SAXONY ROAD ENCINITAS, CA 92024	26-2599786		52,200.	0.			GRANT EXPENSE

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOVING TRADITIONS							
780 STEPHEN RD							
WARMINSTER, PA 18974	34-2015014	501(C)(3)	30,000.	0.			GRANT EXPENSE
NCSY							
11 BROADWAY, 14TH FLOOR							
NEW YORK, NY 10004-1303	13-5623717	501(C)(3)	50,000.	0.			GRANT EXPENSE
OCCIDENTAL COLLEGE							
1518 S. ROBERTSON BLVD.							
LOS ANGELES, CA 90035	95-1667177	501(C)(3)	20,000.	0.			GRANT EXPENSE
			,				
OHEL CHANA HIGH SCHOOL							
1600 CAMPUS ROAD							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90041	46-2869189	501(C)(3)	20,986.	0.			FINANCIAL AID
ONE TABLE							
7162 BEVERLY BLVD. #341	46-4715368	E01/G\/2\	77 000	0			CDANIE EXDENCE
LOS ANGELES, CA 90036	46-4/15368	501(C)(3)	77,000.	0.			GRANT EXPENSE
ONWARD ISRAEL USA INC.							
228 PARK AVENUE SOUTH, SUITE 77191							
NEW YORK, NY 10003	81-2507413	501(C)(3)	38,000.	0.			GRANT EXPENSE
ORTHODOX UNION							
310 GRANT STREET, SUITE 715							
PITTSBURGH, PA 15219	13-5623717	501(C)(3)	101,800.	0.			CAMPERSHIPS/GRANT EXPENS
PALISADES JEWISH EARLY CHILDHOOD							
CENTER CHABAD INC - 11 BROADWAY							GRANT EXPENSE/STUDENT
14TH FLOOR - NEW YORK, NY 10004	77-0600595	501(C)(3)	43,000.	0.			FINANCIAL AID
			15,550.	· ·			
PEPPERDINE UNIVERSITY							
17315 W. SUNSET BLVD							
PACIFIC PALSADES, CA 90272	95-1644037	501(C)(3)	10,000.	0.			GRANT EXPENSE

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PLAN A ADVISORS INC										
24255 PACIFIC COAST HIGHWAY										
MALIBU, CA 90263	46-3339822	501(C)(3)	16,000.	0.			GRANT EXPENSE			
	10 0003022		20,000.	· ·						
PRESSMAN ACADEMY OF TEMPLE BETH AM										
P.O. BOX 165										
THORNWOOD, NY 10594	95-1656370	501(C)(3)	128,879.	0.			STUDENT FINANCIAL AID			
·			,							
REPAIR THE WORLD										
1039 S. LA CIENEGA BLVD.										
LOS ANGELES, CA 90035	36-4524686	501(C)(3)	60,000.	0.			GRANT EXPENSE			
SAMUEL A. FRYER YAVNEH ACADEMY										
SUMMER CAMP - 1460 BROADWAY - NEW										
YORK, NY 10036	95-2117190	501(C)(3)	48,840.	0.			STUDENT FINANCIAL AID			
SEPHARDIC TEMPLE TIFERETH ISRAEL										
5353 W. THIRD STREET	95-1866096	E01/G)/3)	6 000				OMINENM BINANGIAL AID			
LOS ANGELES, CA 90020	95-1866096	501(C)(3)	6,000.	0.			STUDENT FINANCIAL AID			
SHALHEVET HIGH SCHOOL										
10500 WILSHIRE BLVD.										
LOS ANGELES, CA 90024	95-4330860	501(C)(3)	93,101.	0.			STUDENT FINANCIAL AID			
SHALOM INSTITUTE							PROGRAM			
910 S. FAIRFAX AVENUE							SUPPLIES/BOOKS/GRANT			
LOS ANGELES, CA 90036	84-1652923	501(C)(3)	100,300.	0.			EXPENSE			
SHALOM INSTITUTE CAMP AND										
CONFERENCE CENTER - 1014 S.										
WESTLAKE BLVD. STE #14-175 -							CAMPERSHIPS/SCHOLARSHIPS/S			
WESTLAKE VILLAGE, CA 91361	84-1652923	501(C)(3)	272,501.	0.			TIPENDS/GRANT EXPENSE			
SHARSHERET										
1014 S. WESTLAKE BLVD, STE 14-175										
WESTLAKE VILLAGE, CA 91361	13-4198529	501(C)(3)	10,000.	0.			GRANT EXPENSE			

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHOMREI TORAH SYNAGOGUE							
1086 TEANECK ROAD, SUITE 2G							
TEANECK, NJ 07666	95-2153156	501(C)(3)	54,000.	0.			GRANT EXPENSE
SILVERLAKE INDEPENDENT JEWISH	76 226226	302(3)(3)	01,000.	-			
COMMUNITY CENTER - 7353 VALLEY							
CIRCLE BLVD WEST HILLS, CA							GRANT EXPENSE/STUDENT
91304	32-0003071	501(C)(3)	66,000.	0.			FINANCIAL AID
			, ,				
SINAI AKIBA ACADEMY							
1110 BATES AVENUE							
LOS ANGELES, CA 90029	95-2103898	501(C)(3)	157,839.	0.			STUDENT FINANCIAL AID
SINAI TEMPLE							
10400 WILSHIRE BLVD.							
LOS ANGELES, CA 90024	95-2103898	501(C)(3)	25,000.	0.			GRANT EXPENSE
STAND WITH US							
10400 WILSHIRE BLVD.							
LOS ANGELES, CA 90024	01-0566033	501(C)(3)	50,000.	0.			GRANT EXPENSE
STEPHEN S. WISE TEMPLE							
6505 WILSHIRE BLVD., SUITE 500							
LOS ANGELES, CA 90048	95-6087552	501(C)(3)	113,219.	0.			STUDENT FINANCIAL AID
TASHBAR SEPHARDIC YESHIVA KETANA							
15500 STEPHEN S. WISE DRIVE	47-4032122	E01/G\/3\	20 552	_			CULLDENIM ETNANCIAL ATD
LOS ANGELES, CA 90077	47-4032122	201(C)(3)	39,552.	0.			STUDENT FINANCIAL AID
TEMPLE ADAT ELOHIM							
1210 S. LA CIENEGA BLVD.							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90035	95-2596965	501(C)(3)	36,000.	0.			FINANCIAL AID
	75 2570905	301(0)(3)	30,000.	0.			TIMECIAL AID
TEMPLE AHAVAT SHALOM							
2420 EAST HILLCREST DRIVE							
THOUSAND OAKS, CA 91362	95-6122711	501(C)(3)	13,000.	0.			GRANT EXPENSE

Part II Continuation of Grants and Othe	r Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r ago
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE AKIBA							
18200 RINALDI PLACE							
NORTHRIDGE, CA 91326	95-1932032	501(C)(3)	27,000.	0.			GRANT EXPENSE
TEMPLE ALIYAH							
5249 SEPULVEDA BLVD.							
CULVER CITY, CA 90230	95-2236425	501(C)(3)	16,000.	0.			STUDENT FINANCIAL AID
TEMPLE BETH HILLEL							
6025 VALLEY CIRCLE BLVD.							
WOODLAND HILLS, CA 91367	95-1765175	501(C)(3)	40,834.	0.			STUDENT FINANCIAL AID
modeline in the state of	33 1703173	301(0)(3)	10,031.	•			PIODENT TIMENOTES HIS
TEMPLE EMANUEL OF BEVERLY HILLS							
4302 VAN NUYS BLVD.							
SHERMAN OAKS, CA 91403	95-1696713	501(C)(3)	8,000.	0.			STUDENT FINANCIAL AID
TEMPLE ETZ CHAIM							
12326 RIVERSIDE DRIVE							
VALLEY VILLAGE, CA 91607	95-6134243	501(C)(3)	18,000.	0.			STUDENT FINANCIAL AID
TEMPLE ISAIAH							
300 NORTH CLARK DRIVE							
BEVERLY HILLS, CA 90211	95-1691319	501(C)(3)	38,000.	0.			STUDENT FINANCIAL AID
·			, , , , , , , , , , , , , , , , , , ,				
TEMPLE ISRAEL OF HOLLYWOOD							SCHOLARSHIPS/STIPENDS/GRA
1080 E. JANSS ROAD							T EXPENSE/STUDENT
THOUSAND OAKS, CA 91360	95-1664124	501(C)(3)	68,399.	0.			FINANCIAL AID
TEMPLE JUDEA							
10345 WEST PICO BLVD	05 6053005	E01/G\/2\	20.000	_			CONTINUENT EINANGIAT AID
LOS ANGELES, CA 90064	95-6052095	201(C)(2)	20,000.	0.			STUDENT FINANCIAL AID
TEMPLE KOL TIKVAH							
7300 HOLLYWOOD BLVD							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90046	77-0005548	501(C)(3)	15,500.	0.			FINANCIAL AID

(a) Name and address of	(h) [N]	(c) IRC section	(d) Amount of	(a) Amount of	(f) Mothod of	(a) Description of	(h) Durages of great
(a) Name and address of organization or government	(b) EIN	if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE MENORAH							
5429 LINDLEY AVENUE							
TARZANA, CA 91356	95-6006575	501(C)(3)	14,500.	0.			GRANT EXPENSE
TEMPLE RAMAT ZION							
20400 VENTURA BLVD							GRANT EXPENSE/STUDENT
WOODLAND HILLS, CA 91364	95-6006496	501(C)(3)	7,500.	0.			FINANCIAL AID
THE ALEPH INSTITUTE INC							
1101 CAMINO REAL							
REDONDO BEACH, CA 90277	59-2291627	501(C)(3)	20,000.	0.			GRANT EXPENSE
THE JEWISH FEDERATIONS OF NORTH							
AMERICA / UJC - 17655 DEVONSHIRE							
STREET - NORTHRIDGE, CA 91325	13-1624240	501(C)(3)	5,923,334.	0.			SCHOLARSHIPS/STIPENDS
THE MAPLE COUSELING CENTER							
4221 WILSHIRE BLVD., SUITE 240 LOS ANGELES, CA 90010	95-2753118	501/0\/3\	75,000.	0.			GRANT EXPENSE
LOS ANGELES, CA 90010	93-2733110	501(0)(3)	75,000.	0.			GRANI EXPENSE
THE MIRACLE PROJECT							
439 N CANON DR. SUITE #209							
BEVERLY HILLS, CA 90210	27-4030539	501(C)(3)	30,000.	0.			GRANT EXPENSE
THE SHALOM HARTMAN INSTITUTE OF							
NORTH AMERICA - 9301 WILSHIRE BLVD	42 204 420	504 (5) (0)					
STE 507 - BEVERLY HILLS, CA 90210	13-3014387	501(C)(3)	24,000.	0.			GRANT EXPENSE
TOUCH OF KINDNESS, INC.							
475 RIVERSIDE DRIVE, SUITE 1450							
NEW YORK, NY 10115	75-3002144	501(C)(3)	270,000.	0.			GRANT EXPENSE
TRYBAL GATHERINGS, INC.							
345 NORTH LA BREA, SUITE 208							SCHOLARSHIPS/STIPENDS/GR.
LOS ANGELES, CA 90036	82-2536308	501(C)(3)	19,375.	0.			T EXPENSE

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(a) Amount of	(f) Method of	(a) Description of	(b) Purpose of grant
(a) Name and address of organization or government	(b) EIN	if applicable	cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNION FOR REFORM JUDAISM							
1867 BEACON ST. #2							CAMPERSHIPS/SCHOLARSHIPS/
BROOKLINE, MA 02445	13-1663143	501(C)(3)	28,424.	0.			TIPENDS/GRANT EXPENSE
,			,				
UNIVERSITY OF SOUTHERN CALIFORNIA							
633 THIRD AVENUE, 7TH FLOOR							
NEW YORK, NY 10017	95-1642394	501(C)(3)	35,000.	0.			GRANT EXPENSE
USC HILLEL							
3715 MCCLINTOCK AVENUE							
LOS ANGELES, CA 90089	95-4867366	501(C)(3)	140,000.	0.			GRANT EXPENSE
VALLEY BETH SHALOM							
3300 SOUTH HOOVER STREET				_			GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90007	95-1890769	501(C)(3)	163,920.	0.			FINANCIAL AID
VALLEY JEWISH COMMUNITY CENTER							
15739 VENTURA BLVD.							
ENCINO, CA 91436	71-0874686	501 (C) (3)	8,000.	0.			STUDENT FINANCIAL AID
memo, en silve	71 0071000	501(0)(3)	0,000.	•			BIODENI TIMINOTILI MID
VALLEY TORAH HIGH SCHOOL							
18017 CHATSWORTH STREET SUITE 217							
GRANADA HILLS, CA 91344	95-3165544	501(C)(3)	92,287.	0.			STUDENT FINANCIAL AID
<u> </u>			,				
VISTA DEL MAR CHILD & FAMILY							
SERVICE - 12003 RIVERSIDE DRIVE -							
VALLEY VILLAGE, CA 91607	95-1647832	501(C)(3)	30,000.	0.			GRANT EXPENSE
WESTSIDE JEWISH COMMUNITY CENTER							
3200 MOTOR AVENUE							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90035	95-1691010	501(C)(3)	215,000.	0.			FINANCIAL AID
WILSHIRE BOULEVARD TEMPLE							CAMPERERSHIPS/GRANT
5870 WEST OLYMPIC BLVD.	05 1601000	501 (4) (2)	4	_			EXPENSE/STUDENT FINANCIAL
LOS ANGELES, CA 90036	95-1691339	pnT(C)(3)	155,550.	0.			AID

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YAVNEH HEBREW ACADEMY							
3663 WILSHIRE BOULEVARD							
LOS ANGELES, CA 90010	95-2117190	501(C)(3)	19,661.	0.			GRANT EXPENSE
YESHIVA AHARON YAAKOV							
5353 W. 3RD ST							GRANT EXPENSE/STUDENT
LOS ANGELES, CA 90020	95-3405695	501(C)(3)	63,563.	0.			FINANCIAL AID
YESHIVA KETANA OF LOS ANGELES 241 S. DETROIT STREET							
LOS ANGELES, CA 90036	45-4665043	501(C)(3)	43,634.	0.			STUDENT FINANCIAL AID
YESHIVA OHR ELCHONON CHABAD 12131 BURBANK BLVD. VALLEY VILLAGE, CA 91607	95-4384473	501(C)(3)	57,131.	0.			STUDENT FINANCIAL AID
YULA BOYS SCHOOL							CDANTE EVERYGE / COULDENT
7215 WARING AVENUE LOS ANGELES, CA 90046	42-1746735	501(C)(3)	86,174.	0.			GRANT EXPENSE/STUDENT FINANCIAL AID
YULA GIRLS SCHOOL 9760 WEST PICO BLVD.							
LOS ANGELES, CA 90035	20-3081128	501(C)(3)	59,328.	0.			STUDENT FINANCIAL AID

Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance							
SCHOLARSHIPS/STIPENDS	65	202,969.	0.									
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.								
PART I, LINE 2:												
THE RESPONSIBILITY FOR MONITORING (	GRANT AND	PROGRAM I	)   STRIBUTIO	NS IS								
DISTRIBUTED TO THE THREE STRATEGIC	INITIATI	VES: ENSUR	RING THE JE	WISH FUTURE,								
CARING FOR JEWS IN NEED AND COMMUNI	ITY ENGAG	SEMENT. EAC	CH STRATEGI	C INITIATIVE								
IS MANAGED BY PROFESSIONAL STAFF AN	ND VOLUNT	EERS WHO W	ORK TOGETH	ER TO								
IDENTIFY COMMUNITY NEEDS WITHIN THE	AT STRATE	GIC INITIA	TIVE AREA.	THE STAFF								
AND VOLUNTEERS ARE RESPONSIBLE FOR	DEVELOPI	NG AN ANNU	JAL BUDGET	AND FOR								
COMMUNICATING NEW PROGRAM NEEDS THA	AT MAY AR	RISE DURING	THE YEAR	TO EXECUTIVE								
MANAGEMENT, THE STRATEGIC PLANNING												

## SCHEDULE J (Form 990)

**Compensation Information** 

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

JEWISH FEDERATION COUNCIL OF GREATER LA

Employer identification number 95-1643388

Pa	art I Questions Regarding Compensation			
			Yes	No
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			
	X Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	X Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	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	1b	Х	<u> </u>
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?	2	Х	<u> </u>
3	Indicate which, if any, of the following the 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.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		<u> X</u>
С		4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	0.1 11 504/ V0) 504/ V4) 1504/ V00) 1 11 11 5 0			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
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:			v
a	The organization?	5a		X
a	Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	5b		$\vdash$
_	,			
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:	6-		х
	The organization?	6a		X
D	Any related organization?	6b		
7	If "Yes" on line 6a or 6b, describe in Part III.  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	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
3	1 1 1 1 1 1 1 D 1 1 1 D 1 1 1 D 1 1 1 D 1 1 1 D 1 1 1 D 1 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I I D 1 I I D 1 I I I I	8		х
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III  If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
9	D. 11' 50 (050 0( ))	9		
	Regulations section 53.4958-6(c)?		1	

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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.

		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JAY SANDERSON	(i)	642,339.	50,000.	5,940.	19,500.	0.	717,779.	0.
CEO/PRESIDENT (OUTGOING)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ANDREW CUSHNIR	(i)	312,896.	11,925.	11,044.	62,730.	5,104.	403,699.	0.
EXEC VP DONOR RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) IVAN WOLKIND	(i)	326,500.	12,300.	9,270.	25,584.	1,500.	375,154.	0.
CFO/COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) REBECCA SOBELMAN-STERN	(i)	261,500.	9,844.	3,127.	24,645.	1,000.	300,116.	0.
EVP CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CYNTHIA AYALA	(i)	176,885.	0.	10,376.	84,400.	3,364.	275,025.	0.
SVP ADMINISTRATION & HR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ROBERT GOLDENBERG	(i)	250,208.	9,450.	1,044.	0.	1,792.	262,494.	0.
CHIEF CREATIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LORI TESSEL	(i)	238,256.	9,075.	2,745.	0.	3,744.	253,820.	0.
SVP DONOR RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) CAROL KORANSKY	(i)	221,308.	8,344.	0.	17,023.	1,192.	247,867.	0.
EXEC VP SPECIAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) SHIRA ROSENBLATT	(i)	188,758.	0.	1,206.	12,000.	6,030.	207,994.	0.
SVP JEWISH EDUC & ENG	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ELIZABETH BERGER	(i)	164,733.	0.	3,021.	26,000.	7,817.	201,571.	0.
SR VP DONOR REL & PLANNED	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MITCHELL HAMERMAN	(i)	172,550.	0.	1,053.	27,275.	0.	200,878.	0.
SVP CAMPAIGN MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

PART I, LINE 1A:

CERTAIN EXECUTIVES ARE PROVIDED WITH AUTO ALLOWANCES AS PART OF THEIR

COMPENSATION AGREEMENTS. THE ALLOWANCES ARE INCLUDED IN TAXABLE

COMPENSATION

ADDITIONALLY, SPOUSAL TRAVEL IS PROVIDED TO THE CEO ON CERTAIN

INTERNATIONAL TRIPS SUBJECT TO APPROVAL BY THE CHAIRPERSON OF THE BOARD OF

DIRECTORS AND AN ANNUAL CAP OF \$7,500.

PART I, LINE 3:

THE BYLAWS PROVIDE FOR AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE

WHICH REVIEWS AND APPROVES THE COMPENSATION, INCLUDING BENEFITS, OF THE

PRESIDENT/CHIEF EXECUTIVE OFFICER, CHIEF OPERATING AND FINANCIAL OFFICER,

EXECUTIVE VICE PRESIDENTS - CHIEF DEVELOPMENT OFFICER, DIRECTOR OF VALLEY

ALLIANCE, AND OTHER SELECTED EMPLOYEES WHO COMPRISE THE FIVE HIGHEST PAID

EMPLOYEES OF THE FEDERATION.

THE REVIEW AND APPROVAL PROCESS INCLUDES ENGAGING AN OUTSIDE CONSULTANT WHO

USES SALARY SURVEYS AND STUDIES OF NON-PROFIT ORGANIZATIONS TO PROPOSE A

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.
COMPENSATION PACKAGE. THE REVIEW AND APPROVAL OCCUR UPON HIRING OF THE
OFFICER, RENEWAL OR EXTENSION OF THE EMPLOYEE'S EMPLOYMENT AGREEMENT, OR
WHEN THE COMPENSATION IS MODIFIED. AFTER THE EXECUTIVE COMPENSATION
COMMITTEE HAS SETTLED ON A COMPENSATION MATTER, THE RESULTS ARE REPORTED TO
THE BOARD. THE COMPENSATION OF THE CURRENT CHIEF EXECUTIVE OFFICER WAS
APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE IN 2009, 2012, 2015, AND
AGAIN IN 2017 AS PART OF THE RENEWAL OF HIS EMPLOYMENT AGREEMENT.
PART I, LINE 7:
THE CEO'S EMPLOYMENT AGREEMENT PROVIDES FOR A DISCRETIONARY BONUS EACH YEAR
AS MAY BE DETERMINED BY THE BOARD OF DIRECTORS IN ITS SOLE DISCRETION.
ADDITIONALLY, BONUSES TO OTHER EMPLOYEES WERE ALSO SUBJECT TO APPROVAL BY
THE BOARD OF DIRECTORS.

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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 for instructions and the latest information.

Name of the organization JEWISH FEDERATION COUNCIL OF GREATER LA Employer identification number 95-1643388

Par	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determin noncash contribution a		s	
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	X	17	30,550.	SELLING COST			
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	140	2,116,158.	MARKET VALUE			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24 25	Archeological artifacts  Other ► ( ISRAEL BONDS )	X	4	17 000	SELLING COST			
26		21	-	17,000	DUDUING CODI			
27	Other ( ) Other ( )							
28	Other ( )							
29	Number of Forms 8283 received by the organiz	ation during	the tax vear for co	ontributions				
	for which the organization completed Form 828	-						
	3	,	3			Yes	No	
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?				30a		Х	
b								
31								
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
	contributions?				32a	Х		
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,			
	describe in Part II.							

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

## SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

JEWISH FEDERATION COUNCIL OF GREATER LA

Employer identification number 95-1643388

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITY AND LEVERAGES ITS RESOURCES TO ASSURE THE CONTINUITY OF THE

JEWISH PEOPLE, SUPPORT A SECURE STATE OF ISRAEL, CARE FOR JEWS IN NEED

HERE AND ABROAD, AND MOBILIZE ON ISSUES OF CONCERN TO THE COMMUNITY,

ALL WITH OUR LOCAL, NATIONAL, AND INTERNATIONAL PARTNERS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONCERN TO THE COMMUNITY, ALL WITH OUR LOCAL, NATIONAL, AND

FORM 990, PART VI, SECTION A, LINE 2:

INTERNATIONAL PARTNERS.

LES BIDER AND LYNN BIDER HAVE A FAMILY RELATIONSHIP

FORM 990, PART VI, SECTION A, LINE 7A:

PER ARTICLE 5.5 OF THE ORGANIZATION'S BYLAWS, THE FEDERATION'S GOVERNING BODY AND GOVERNING DOCUMENTS DELEGATE BROAD AUTHORITY TO AN EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE CHAIR, THE VICE THE CHAIR OR ONE OF THE CO-CHAIRS OF BOTH THE DEVELOPMENT CHAIR(S) COMMITTEE AND THE FINANCE AND ADMINISTRATION COMMITTEE, AND NOT LESS THAN SEVEN (7) ADDITIONAL DIRECTORS NOMINATED BY THE CHAIR AND APPROVED BY THE BOARD. AMONG THE ADDITIONAL MEMBERS SHALL BE INCLUDED THE CHAIR OR A CO-CHAIR, WHO IS A DIRECTOR, OF EACH STRATEGIC INITIATIVE COMMITTEE AND THE CHAIR OR A CO-CHAIR OF OTHER STANDING COMMITTEES NOT ALREADY A MEMBER AS OF RIGHT.

FORM 990, PART VI, SECTION B, LINE 11B:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021 Page 2

THE FORM 990 IS PREPARED BY AN OUTSIDE PUBLIC ACCOUNTING FIRM. WHEN THE
FORM 990 IS COMPLETE, BUT BEFORE IT IS FILED, THE AUDIT COMMITTEE MEETS
WITH THE CFO AND VP OF FINANCE AND REPRESENTATIVES FROM THE PUBLIC
ACCOUNTING FIRM TO PERFORM A THOROUGH REVIEW OF THE FORM 990. THE BOARD HAS
EMPOWERED THE AUDIT COMMITTEE TO PERFORM THIS REVIEW OF THE FORM 990 PRIOR
TO FILING.

PRIOR TO FILING, THE MEMBERS OF THE BOARD OF DIRECTORS ARE PROVIDED AN ELECTRONIC COPY OF THE FORM 990 FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C:

Name of the organization

THE JEWISH FEDERATION HAS A WRITTEN CONFLICT OF INTEREST POLICY. BOARD

MEMBERS, COMMITTEE MEMBERS, OFFICERS, KEY EMPLOYEES AND SELECTED STAFF ARE

SUBJECT TO COMPLIANCE WITH THE POLICY. THE POLICY IS POSTED ON THE

ORGANIZATION'S INTRANET. ADDITIONALLY, THE POLICY IS CIRCULATED ON AN

ANNUAL BASIS TO AFFECTED PERSONS ALONG WITH A QUESTIONNAIRE TO FURTHER

IDENTIFY RELATIONSHIPS THAT REQUIRE DISCLOSURE ON THE FORM 990.

THE POLICY DEFINES PROCEDURES FOR THE CONFLICTED PERSON AND/OR OTHERS TO

ENSURE THAT BUSINESS TRANSACTIONS ARE IN THE BEST INTEREST OF THE

ORGANIZATION, BUSINESS AND FAMILY RELATIONSHIPS ARE FULLY DISCLOSED, AND

DISCIPLINARY MEASURES ARE ENFORCED. WHEN A POTENTIAL CONFLICT OF INTEREST

IS IDENTIFIED BY THE CONFLICTED PARTY OR THE JEWISH FEDERATION, THE NATURE

OF THE INTEREST OR INVOLVEMENT IS IMMEDIATELY COMMUNICATED TO THE

PRESIDENT, BOARD CHAIR, AND THE RESPECTIVE COMMITTEE CONSIDERING THE

TRANSACTION. IF THE PARTICULAR TRANSACTION REQUIRES A VOTE, THE CONFLICTED

PARTY SHALL NOT BE COUNTED FOR PURPOSES OF A QUORUM NOR SHALL HE OR SHE

VOTE ON THE MATTER.

**Employer identification number** 

<u>Schedule O (Form 990) 2021</u> Page **2** 

Name of the organization

JEWISH FEDERATION COUNCIL OF GREATER LA

Employer identification number 95-1643388

PERSONS PREPARING AND SIGNING THE FORM 990 ARE FAMILIAR WITH BOARD MEMBERS,

COMMITTEE MEMBERS, FINANCIAL TRANSACTIONS (INCLUDING CONTRACTUAL

ARRANGEMENTS) AND THE RULES AND POLICIES RELATED TO CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

PROCESS FOR DETERMINING EXECUTIVE COMPENSATION:

THE BYLAWS PROVIDE FOR AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE

WHICH REVIEWS AND APPROVES THE COMPENSATION, INCLUDING BENEFITS, OF THE

PRESIDENT/CHIEF EXECUTIVE OFFICER, CHIEF OPERATING AND FINANCIAL OFFICER,

EXECUTIVE VICE PRESIDENTS - CHIEF DEVELOPMENT OFFICER, DIRECTOR OF VALLEY

ALLIANCE, AND OTHER SELECTED EMPLOYEES WHO COMPRISE THE FIVE HIGHEST PAID

EMPLOYEES OF THE FEDERATION.

THE REVIEW AND APPROVAL PROCESS INCLUDES ENGAGING AN OUTSIDE CONSULTANT WHO

USES SALARY SURVEYS AND STUDIES OF NON-PROFIT ORGANIZATIONS TO PROPOSE A

COMPENSATION PACKAGE. THE REVIEW AND APPROVAL OCCUR UPON HIRING OF THE

OFFICER, RENEWAL OR EXTENSION OF THE EMPLOYEE'S EMPLOYMENT AGREEMENT, OR

WHEN THE COMPENSATION IS MODIFIED. AFTER THE EXECUTIVE COMPENSATION

COMMITTEE HAS SETTLED ON A COMPENSATION MATTER, THE RESULTS ARE REPORTED TO

THE BOARD. THE COMPENSATION OF THE CURRENT CHIEF EXECUTIVE OFFICER WAS

APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE IN 2009, 2012, 2015, AND

AGAIN IN 2017 AS PART OF THE RENEWAL OF HIS EMPLOYMENT AGREEMENT.

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

THE JEWISH FEDERATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE FOR

INSPECTION AT THE OFFICE OF THE ORGANIZATION.

JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388  THE JEWISH FEDERATION MAKES ITS CONFLICT OF INTEREST POLICY AND AUDITED  FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE  ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE  ACCESSED FROM THE PUBLIC WEBSITE.  FORM 990, PART XII, LINE 2C:  THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS  FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	Schedule O (Form 990) 2021	Page <b>2</b>
FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE ACCESSED FROM THE PUBLIC WEBSITE.  FORM 990, PART XII, LINE 2C: THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	Name of the organization  JEWISH FEDERATION COUNCIL OF GREATER LA	
FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE ACCESSED FROM THE PUBLIC WEBSITE.  FORM 990, PART XII, LINE 2C: THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE		
ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE  ACCESSED FROM THE PUBLIC WEBSITE.  FORM 990, PART XII, LINE 2C:  THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS  FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	THE JEWISH FEDERATION MAKES ITS CONFLICT OF INTEREST POLIC	Y AND AUDITED
ACCESSED FROM THE PUBLIC WEBSITE.  FORM 990, PART XII, LINE 2C:  THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS  FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OFFIC	E OF THE
FORM 990, PART XII, LINE 2C:  THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS  FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF TH	EY CANNOT BE
THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	ACCESSED FROM THE PUBLIC WEBSITE.	
FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE	FORM 990, PART XII, LINE 2C:	
	THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF	ITS
NOT CHANGED FROM THE PREVIOUS YEAR	FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOU	NTANT HAVE
	NOT CHANGED FROM THE PREVIOUS YEAR	

#### SCHEDULE R (Form 990)

Part I

## **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

JEWISH FEDERATION COUNCIL OF GREATER LA

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

95-1643388

(a)	(b)	(c)	(d)	(e)		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea		Direct controlling entity	
	-						
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990	D, Part IV, line 34, I	pecause it had one	or more related tax-ex	empt	
(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	con	<b>g)</b> 512(b)(13) trolled tity?
		377		501(c)(3))		Yes	No
JEWISH COMMUNITY FOUNDATION CHARITABLE FUND							
- 95-3507310, 6505 WILSHIRE BLVD, SUITE							
1200, LOS ANGELES, CA 90048	GENERAL SUPPORT	CALIFORNIA	501(C)(3)	PF	JCF		X
JEWISH COMMUNITY FOUNDATION OF LOS ANGELES -							
95-6111928, 6505 WILSHIRE BLVD, SUITE 1200,							
LOS ANGELES, CA 90048	GENERAL SUPPORT	CALIFORNIA	501(C)(3)	LINE 7	JFC		X
	4						
	-						

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.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disproportion allocations'		Code V-UBI amount in box 20 of Schedule		Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	<u> </u>
	1										
	1										
	1										
	1										
	1										
	1										
	l	l	l	1		l			<u> </u>	$\perp$	

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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) (d) Legal domicile (state or foreign country) (C)		(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country						Yes	No

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art V	Transactions With Related Organizations.	Complete if the organization answered "	Yes" on Form 990, Part IV, line 34, 35b, or 36.
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Not	lote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	_		Yes	No				
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?								
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1	la	Х					
	<b>b</b> Gift, grant, or capital contribution to related organization(s)		lb		Х				
	c Gift, grant, or capital contribution from related organization(s)		Ic	Х					
	d Loans or loan guarantees to or for related organization(s)		ld		Х				
	e Loans or loan guarantees by related organization(s)		le		Х				
f	f Dividends from related organization(s)								
g	g Sale of assets to related organization(s)	1	lg		X				
	h Purchase of assets from related organization(s)		lh		X				
i	i Exchange of assets with related organization(s)		1i		Х				
j	j Lease of facilities, equipment, or other assets to related organization(s)								
k	k Lease of facilities, equipment, or other assets from related organization(s)								
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	l .	11		<u>X</u>				
m	m Performance of services or membership or fundraising solicitations by related organization(s)	<u>1</u>	m		<u>X</u>				
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		In	Х					
	o Sharing of paid employees with related organization(s)		lo		Х				
р	p Reimbursement paid to related organization(s) for expenses		lp		X				
	q Reimbursement paid by related organization(s) for expenses		Iq	Х					
r	r Other transfer of cash or property to related organization(s)		1r		X				
s	s Other transfer of cash or property from related organization(s)	1	ls		X				
	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 thresh								
	(a) (b) (c) (d Name of related organization Transaction Amount involved Method of determining	i) ng amount involve	ed						

(a) Name of related organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
<u>(2)</u>			
(3)			
<u>(4)</u>			
<u>(5)</u>			
(6)			

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Part VI 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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- ate tions?		General manage partne	(k)  Al or Percentage ownership
			,	Tes No		163	140		1031	10
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Schedule R	(Form 990) 2021	JEWISH	FEDERATION	COUNCIL	OF	GREATER	LA	95-1643388	Page 5
Part VII	(Form 990) 2021 Supplemental II	nformation							
	Provide additional in	formation for respon	nses to questions on S	Chadula B. Saa	inetru	ctions			
	1 TOVIGE AGGILIONAL III	iornation for respon	ises to questions on c	criedule 11. Oee	IIISIIU	Ctions.			
						<u></u>			