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Part 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

EACH AND EVERY DAY, THE JEWISH FEDERATION OF BROWARD COUNTY JOINS TOGETHER THE HUMAN AND FINANCIAL RESOURCES OF OUR COMMUNITY TO SAVE AND IMPROVE JEWISH LIVES IN BROWARD COUNTY, IN ISRAEL AND AROUND THE WORLD THE FEDERATION ACTS IN CONCERT WITH ITS NETWORK OF BENEFICIARY AGENCIES TO SAFEGUARD AND ADDRESS LOCAL EDUCATIONAL AND SOCIAL SERVICE NEEDS, PERPETUATE JEWISH TRADITION AND HERITAGE, AND ENSURE THE CONTINUITY AND SURVIVAL OF ISRAEL, AND JEWISH COMMUNITIES AROUND THE WORLD

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 6,341,359 including grants of \$ 5,314,020) (Revenue \$ 92,275)

WE, THE MEMBERS OF THE BROWARD JEWISH COMMUNITY, ARE COMMITTED TO A VISION FOR THE JEWISH COMMUNITY OF BROWARD COUNTY IN WHICH AGENCIES, SYNAGOGUES AND ORGANIZATIONS WORK IN PARTNERSHIP SO THAT WE INCREASE COUNTY-WIDE MEASURABLE PARTICIPATION IN JEWISH LIFE WITH THE GOAL OF HAVING THE MAXIMUM NUMBER OF BROWARD JEWS INVOLVED IN ALL EXPRESSIONS OF JEWISH LIFE, AND WE NURTURE JEWISH VALUES FROM GENERATION TO GENERATION WE WILL ACCOMPLISH THIS BY BUILDING PARTNERSHIPS TO CREATE MULTIPLE STRATEGIES AND PROGRAMS THAT 1) ENABLE EVERY BROWARD JEWISH CHILD AND TEEN TO PARTICIPATE IN MEANINGFUL JEWISH EXPERIENCES THAT WILL CREATE STRONG JEWISH IDENTITIES THAT WILL LAST THROUGHOUT THEIR LIFETIMES 2) ENABLE BROWARD JEWS OF EVERY AGE TO ACTIVELY PARTICIPATE IN JEWISH LIVING AND LEARNING 3) ENSURE THAT EVERY BROWARD JEW LIVES OUT HIS OR HER LIFE IN DIGNITY 4) BROADEN THE OPPORTUNITIES FOR ANY JEWISH CHILD OR ADULT WITH DEVELOPMENTAL DISABILITIES TO LIVE AND LEARN IN A JEWISH ENVIRONMENT 5) GROW BROWARD COUNTY'S PARTICIPATION IN ISRAEL'S FUTURE AND ESPECIALLY IN REBUILDING AND REVITALIZING ALL OF ISRAEL 6) ADVOCATE FOR JEWISH SECURITY IN BROWARD COUNTY AND THROUGHOUT THE WORLD

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

6,341,359

Form 990 (2013)

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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
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	No
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	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
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 Yes	
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c Yes	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
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	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
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	No
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	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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.	1a	14
b	Enter the number of Forms W-2G included in 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	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	28
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	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	No
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).			
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	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	No
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	No
10 Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11 Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
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.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section 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		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
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	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
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	Yes
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	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	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	Yes
b	Describe in 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	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in 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	No
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	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	FL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization GAYLE KOLASA 5890 SOUTH PINE ISLAND ROAD DAVIE, FL 33328 (954) 252-6921	

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	617,306	0	65,772

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a3,678,333					
	b	Membership dues	1b					
	c	Fundraising events	1c665,854					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f1,749,872					
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f		6,094,059				
Program Service Revenue	2a	VARIOUS PROGRAMS	Business Code 900099	92,275	92,275			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		92,275				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	3,546,831			3,546,831	
4		Income from investment of tax-exempt bond proceeds						
5		Royalties						
6a		Gross rents	(i) Real	(ii) Personal				
		b	Less rental expenses					
		c	Rental income or (loss)					
		d	Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)	2,105,243			2,105,243	
8a		Gross income from fundraising events (not including \$ 665,854 of contributions reported on line 1c) See Part IV, line 18	a	187,985				
		b	Less direct expenses	b	502,282			
		c	Net income or (loss) from fundraising events		-314,297			-314,297
9a		Gross income from gaming activities See Part IV, line 19	a					
		b	Less direct expenses	b				
		c	Net income or (loss) from gaming activities					
10a		Gross sales of inventory, less returns and allowances	a					
		b	Less cost of goods sold	b				
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code						
11a		GAIN ON DEBT FORGIVENESS	900099	1,262,657			1,262,657	
b	OTHER REVENUE	900099	662,574			662,574		
c								
d	All other revenue							
e	Total. Add lines 11a-11d		1,925,231					
12	Total revenue. See Instructions		13,449,342	92,275	0	7,263,008		

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	5,314,020	5,314,020		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	593,093	59,309	59,309	474,475
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	1,141,942	458,859	652,074	31,009
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.	173,141	43,393	75,167	54,581
10	Payroll taxes.	125,002	37,332	51,252	36,418
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	1,045		1,045	
c	Accounting.	37,500		37,500	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion.	62,732	11,822	17,435	33,475
13	Office expenses.	71,405	19,536	29,222	22,647
14	Information technology.	25,281	7,577	11,284	6,420
15	Royalties.				
16	Occupancy.	125,683	37,214	54,525	33,944
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	11,381	936	3,201	7,244
20	Interest.	11,056	3,302	4,533	3,221
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	146,942	43,884	60,248	42,810
23	Insurance.	47,242	14,149	20,209	12,884
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	PROMOTION ACTIVITIES	295,386	265,075	2,393	27,918
b	BANK CHARGES	49,290		6,011	43,279
c	PROFESSIONAL FEES	36,545	9,896	13,992	12,657
d	AUTO EXPENSES	28,559	1,576	9,040	17,943
e	All other expenses	130,546	13,479	50,792	66,275
25	Total functional expenses. Add lines 1 through 24e.	8,427,791	6,341,359	1,159,232	927,200
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		404,054	1	249,122
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		1,868,149	3	2,130,033
	4	Accounts receivable, net		52,184	4	30,797
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		48,414	9	31,569
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a26,237,824			
	b	Less accumulated depreciation	10b11,155,774	15,744,272	10c	15,082,050
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		75,016,645	13	83,709,013
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		1,913,616	15	2,217,554
	16	Total assets. Add lines 1 through 15 (must equal line 34)		95,047,334	16	103,450,138
Liabilities	17	Accounts payable and accrued expenses		309,307	17	326,662
	18	Grants payable		4,220,552	18	2,710,735
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		9,000,000	23	8,250,000
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		10,665,823	25	11,089,425
	26	Total liabilities. Add lines 17 through 25		24,195,682	26	22,376,822
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		40,517,074	27	48,906,297
	28	Temporarily restricted net assets		6,921,812	28	7,982,315
	29	Permanently restricted net assets		23,412,766	29	24,184,704
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		70,851,652	33	81,073,316
	34	Total liabilities and net assets/fund balances		95,047,334	34	103,450,138

Part 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	13,449,342
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,427,791
3	Revenue less expenses Subtract line 2 from line 1	3	5,021,551
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	70,851,652
5	Net unrealized gains (losses) on investments	5	5,200,113
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 in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	81,073,316

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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		No
2b	Were the organization's financial statements audited by an independent accountant? 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 ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:

EIN: 59-0967823

Name: UNITED JEWISH COMMUNITY OF BROWARD COUNTY
INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

[illegible]

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARSHALL GOLDBERG BOARD MEMBER	1 00	X						0	0	0
BRUCE GREENBERG BOARD MEMBER	1 00	X						0	0	0
BILL GROSS BOARD MEMBER	1 00	X						0	0	0
SHELDON HARR BOARD MEMBER	1 00	X						0	0	0
LEE KADIN BOARD MEMBER	1 00	X						0	0	0
WALTER KATZ BOARD MEMBER	1 00	X						0	0	0
LAUREN KIMMEL BOARD MEMBER	1 00	X						0	0	0
JEFFREY LEBOWITZ BOARD MEMBER	1 00	X						0	0	0
RAYMOND LEIGHTMAN BOARD MEMBER	1 00	X						0	0	0
AIMEE LEWINTER BOARD MEMBER	1 00	X						0	0	0
RICHARD LINEVSKY BOARD MEMBER	1 00	X						0	0	0
GARY MARKS BOARD MEMBER	1 00	X						0	0	0
JILL MILLER BOARD MEMBER	1 00	X						0	0	0
LORI MITZELS BOARD MEMBER	1 00	X						0	0	0
ELISSA MOGILEFSKY BOARD MEMBER	1 00	X						0	0	0
WENDI NORRIS BOARD MEMBER	1 00	X						0	0	0
BRETT ROBINS BOARD MEMBER	1 00	X						0	0	0
IRV ROSENBAUM PRESIDENT, SOREF JCC	1 00	X						0	0	0
ERICK ROSENSTRAUCH BOARD MEMBER	1 00	X						0	0	0
JOSEPH RUBINSZTAIN BOARD MEMBER	1 00	X						0	0	0
LEONARD SAMUELS BOARD MEMBER	1 00	X						0	0	0
JEFFREY SANDLER BOARD MEMBER	1 00	X						0	0	0
JEFFREY SASTER BOARD MEMBER	1 00	X						0	0	0
ROBERT SCHNEIDER BOARD MEMBER	1 00	X						0	0	0
IBBY SCHULMAN BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STACY SCHULMAN BOARD MEMBER	1 00	X						0	0	0
SHERI SCHULTZ BOARD MEMBER	1 00	X						0	0	0
STEWART SHULL BOARD MEMBER	1 00	X						0	0	0
CAROLYN SHAPIR BOARD MEMBER	1 00	X						0	0	0
DAVID SILVER BOARD MEMBER	1 00	X						0	0	0
RON SIMON PRESIDENT, JAFCO	1 00	X						0	0	0
ANNE SOPSHIN BOARD MEMBER	1 00	X						0	0	0
ANDREW SOSSIN BOARD MEMBER	1 00	X						0	0	0
JUDY SPATZ BOARD MEMBER	1 00	X						0	0	0
MARSHALL STAIMAN BOARD MEMBER	1 00	X						0	0	0
ERIK SUSSMAN BOARD MEMBER	1 00	X						0	0	0
MANNY SYNALOVSKI BOARD MEMBER	1 00	X						0	0	0
SELMA TELLES BOARD MEMBER	1 00	X						0	0	0
SETH WISE BOARD MEMBER	1 00	X						0	0	0
ERIC STILLMAN PRESIDENT & CEO	36 50			X				299,572	0	43,233
BRUCE YUDEWITZ CHIEF OPERATING OFFICER	36 50			X				115,895	0	7,962
GAYLE KOLASA VP-FINANCE	36 50			X				78,518	0	6,537
NICOLE PACKER SVP - FRD DIRECTOR	36 50					X		123,321	0	8,040

SCHEDULE A

(Form 990 or 990EZ)

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.** ▶ **See separate instructions.**
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at**
www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC	Employer identification number 59-0967823
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Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1	☐	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	☐	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	☐	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	☒	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	☐	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
e	☐	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	5,405,716	6,287,730	14,196,569	6,525,835	5,428,205	37,844,055
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	5,405,716	6,287,730	14,196,569	6,525,835	5,428,205	37,844,055
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)						
6 Public support. Subtract line 5 from line 4						37,844,055

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	5,405,716	6,287,730	14,196,569	6,525,835	5,428,205	37,844,055
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-4,835,574	5,710,548	130,846			1,005,820
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	53,707	282,791	1,125,014	542,098	662,574	2,666,184
11	Total support (Add lines 7 through 10)						41,516,059
12	Gross receipts from related activities, etc (see instructions)					12	2,959,092
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage				
14	Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	<table><tr><td>14</td><td>91 160 %</td></tr></table>	14	91 160 %
14	91 160 %			
15	Public support percentage for 2012 Schedule A, Part II, line 14	<table><tr><td>15</td><td>93 140 %</td></tr></table>	15	93 140 %
15	93 140 %			
16a	33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☒		
b	33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐		
17a	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐		
b	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	☐		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation	
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SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC	Employer identification number 59-0967823
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	78	
2 Aggregate contributions to (during year)	488,175	
3 Aggregate grants from (during year)	586,890	
4 Aggregate value at end of year	6,971,736	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☒ Yes ☐ No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	☒ Yes ☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III

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

- 3

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

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

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

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	58,901,428	54,565,907	47,718,873	40,536,841	35,934,526
b Contributions	8,915,285	2,531,078	10,823,688	1,954,808	229,797
c Net investment earnings, gains, and losses	10,347,678	6,935,187	-1,339,808	9,723,872	4,945,411
d Grants or scholarships					
e Other expenditures for facilities and programs	5,190,178	5,130,744	2,636,846	4,496,648	572,893
f Administrative expenses					
g End of year balance	72,974,213	58,901,428	54,565,907	47,718,873	40,536,841

- 2

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

Board designated or quasi-endowment

59 000 %

b

Permanent endowment

34 000 %

c

Temporarily restricted endowment

7 000 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds
- Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.
- | Description of property | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | | 5,194,519 | | 5,194,519 |
| b Buildings | | 3,894,068 | 1,172,524 | 2,721,544 |
| c Leasehold improvements | | | | |
| d Equipment | | 125,999 | 85,258 | 40,741 |
| e Other | | 17,023,238 | 9,897,992 | 7,125,246 |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | 15,082,050 |
- Schedule D (Form 990) 2013

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	19,812,353
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	5,200,113
b	Donated services and use of facilities	2b	660,616
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	502,282
e	Add lines 2a through 2d	2e	6,363,011
3	Subtract line 2e from line 1	3	13,449,342
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	13,449,342

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	9,590,689
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	660,616
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	502,282
e	Add lines 2a through 2d	2e	1,162,898
3	Subtract line 2e from line 1	3	8,427,791
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	8,427,791

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART X, LINE 2	THE FEDERATION IS EXEMPT FROM FEDERAL INCOME TAXES AS AN ORGANIZATION, AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THIS EXEMPTION IS SUBJECT TO PERIODIC REVIEW BY THE INTERNAL REVENUE SERVICE. THE FEDERATION RECOGNIZES AND MEASURES TAX POSITIONS BASED ON THEIR TECHNICAL MERIT AND ASSESSES THE LIKELIHOOD THAT THE POSITIONS WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES AND INFORMATION AVAILABLE AT THE END OF EACH PERIOD. INTEREST AND PENALTIES ON TAX LIABILITIES, IF ANY, WOULD BE RECORDED IN INTEREST EXPENSE AND OTHER NON-INTEREST EXPENSE, RESPECTIVELY. THE U.S. FEDERAL JURISDICTION IS THE MAJOR TAX JURISDICTION WHERE THE FEDERATION FILES INCOME TAX RETURNS. THE FEDERATION IS GENERALLY NO LONGER SUBJECT TO U.S. FEDERAL EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2011.
PART XI, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EVENTS EXPENSE 502,282
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EVENTS EXPENSE 502,282

[illegible]

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ▶ See separate instructions.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC	Employer identification number 59-0967823
---	--

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and email solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

- 3

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
-
-

Part II Fundraising Events. Complete if the organization answered "Yes" to 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.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))	
			<u>CCC</u> (event type)	<u>MEN'S NIGHT OUT</u> (event type)	<u>10</u> (total number)		
	1	Gross receipts	225,643	189,335	438,861	853,839	
	2	Less Contributions . . .	174,010	137,110	354,734	665,854	
	3	Gross income (line 1 minus line 2)	51,633	52,225	84,127	187,985	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes . . .					
	6	Rent/facility costs . . .	8,135	40,167	94,832	143,134	
	7	Food and beverages .		17,868	90,409	108,277	
	8	Entertainment	5,000	51,975	67,947	124,922	
	9	Other direct expenses .	44,820	27,346	53,783	125,949	
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(502,282)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-314,297

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
Direct Expenses	6	Volunteer labor			
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ 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 operated in

a	The organization's facility	13a	%
b	An outside facility	13b	%

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

If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ 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?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC

Employer identification number
59-0967823

Part I General Information on Grants and Assistance

1

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

☒ Yes ☐ No

2

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

55

3

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

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(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 non-cash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
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Additional Data

Software ID:
Software Version:
EIN: 59-0967823
Name: UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF HEBREW UNIVERSITY 100 W CYPRESS CREEK ROAD 865 FORT LAUDERDALE, FL 33309	13-1568923	501(C)(3)	5,184				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF IDC HERZLIYA 116 EAST 16TH STREET 11TH FLOOR NEW YORK,NY 10003	31-1577589	501(C)(3)	60,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF JORDAN RIVER VILLAGE 600 COLUMBUS AVE APT 9H NEW YORK,NY 10024	36-4558884	501(C)(3)	8,800				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED MAGEN DAVID ADOM FOR ISRAEL 16499 NE 19TH AVENUE NORTH MIAMI BEACH, FL 33162	13-1790719	501(C)(3)	9,084				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTI-DEFAMATION LEAGUE 61640 RHODE ISLAND AVENUE NW WASHINGTON,DC 20036	13-1818723	501(C)(3)	8,767				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B'NAI AVIV 1410 INDIAN TRACE WESTON, FL 33326	65-0096470	501(C)(3)	10,599				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B'NAI BRITH YOUTH ORG 2020 K ST NW 7 FLOOR WASHINGTON,DC 20006	31-1794932	501(C)(3)	18,112				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED MAGEN DAVID INTERNATIONAL 1900 NW CORPORATE BLVD W-310 BOCA RATON, FL 33431	13-1790719	501(C)(3)	51,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAUSER MAIMONIDES ACADEMY 5300 SW 40TH AVENUE FT LAUDERDALE, FL 33314	65-0213879	501(C)(3)	62,911				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR LEARNING & LEADERSHIP 440 PARK AVENUE SOUTH 4TH FLOOR NEW YORK, NY 10016	23-7390358	501(C)(3)	10,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD OCEAN SYNAGOGUE 7 SEACREST PARKWAY HOLLYWOOD, FL 33019	65-0805511	501(C)(3)	5,200				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION KOL TIKVAH 6750 UNIVERSITY DRIVE PARKLAND, FL 33067	65-0291376	501(C)(3)	7,681				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANIEL CANTOR SENIOR CENTER 5000 NOB HILL ROAD SUNRISE, FL 33351	65-0245068	501(C)(3)	105,555				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAVID POSNACK JCC 5850 S PINE ISLAND ROAD DAVIE, FL 33328	59-2075982	501(C)(3)	737,805				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAVID POSNACK JEWISH DAY SCHOOL 5890-A SOUTH PINE ISLAND ROAD DAVIE, FL 33328	59-1606514	501(C)(3)	301,923				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR JEWISH CAMP 253 W 35TH STREET 4TH FLOOR NEW YORK,NY 10001	22-3551013	501(C)(3)	17,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BOULEVARD MIAMI,FL 33117	59-0624404	501(C)(3)	17,410				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HADASSAH 50 W 58 STREET NEW YORK, NY 10019	59-1826857	501(C)(3)	25,361				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HAROLD GRINSPOON FOUNDATION 67 HUNT ST SUITE 100 AGAWAM,MA 01001	04-6685725	501(C)(3)	60,235				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HOLOCAUST DOC & EDUCATION CENTER 2031 HARRISON STREET HOLLYWOOD, FL 33020	59-1992826	501(C)(3)	21,031				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HEBREW ACAD MARGATE 1500 N STATE ROAD 7 MARGATE, FL 33063	65-1026989	501(C)(3)	75,124				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL BROWARDPALM BEACH 800 8TH ST NW WASHINGTON,DC 20001	52-1844823	501(C)(3)	16,022				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLHOLOCAUST LEARNING & EDUCATION FUND 3064 BIRKDALE DRIVE WESTON, FL 33332	46-3296698	501(C)(3)	10,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JACKSONVILLE JEWISH CENTER 3662 CROWN POINT ROAD JACKSONVILLE, FL 32257	59-0624411	501(C)(3)	16,500				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JAFCO -JEWISH ADOPT & FOSTER CARE 4200 NORTH UNIVERSITY DRIVE SUNRISE,FL 33351	20-0898587	501(C)(3)	77,824				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JCPA-JEWISH COUNCIL PUBLIC AFFAIRS 116 E 27TH ST 10TH FL NEW YORK, NY 10016	13-1624104	501(C)(3)	5,125				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF METROPOLITAN CHICAGO 30 S WELLS 3RD FLOOR CHICAGO,IL 60606	36-2167761	501(C)(3)	5,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JEWISH FEDERATIONS OF NORTH AMERICA 25 BROADWAY 1700 NEW YORK,NY 10004	13-1624240	501(C)(3)	1,010,001				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JEWISH NATIONAL FUND 1951 NW 19TH STREET SUITE A100 BOCA RATON, FL 33431	13-1659627	501(C)(3)	11,025				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH STUDENT CONNECTION 7430 WILES ROAD CORAL SPRINGS,FL 33065	61-1420053	501(C)(3)	14,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JFS-JEWISH FAMILY SERVICE 100 S PINE ISLAND ROAD SUITE 230 PLANTATION, FL 33324	59-0995106	501(C)(3)	613,886				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOSEPH MEYERHOFF SENIOR CENTER DBA SOUTHEAST FOCAL 3081 TAFT STREET HOLLYWOOD,FL 33021	20-8473893	501(C)(3)	250,326				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KESHER 18900 NE 25TH AVENUE SU3ITE 219 NORTH MIAMI BEACH, FL 33180	65-0591858	501(C)(3)	14,800				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 55 NORTH FIFTH STREET PHILADELPHIA,PA 19106	23-7379280	501(C)(3)	17,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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ORLOFF CENTRAL AGENCY FOR JEWISH EDUCATION 5890 SO PINE ISLAND BLVD DAVIE,FL 33328	03-0429765	501(C)(3)	344,914				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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ORT AMERICA 777 YAMATO RD 100 BOCA RATON, FL 33431	13-5562424	501(C)(3)	8,091				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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PENNSYLVANIA STATE UNIVERSITY ONE OLD MAIN UNIVERSITY PARK, PA 168021506	24-6000376	501(C)(3)	10,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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PRINCETON CENTER FOR JEWISH LIFE 70 WASHINGTON ROAD PRINCETON,NJ 08540	22-6071127	501(C)(3)	25,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAMAT SHALOM 11301 WEST BROWARD BLVD PLANTATION, FL 33325	59-1689889	501(C)(3)	10,513				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SOREF JEWISH COMMUNITY CENTER 6501 W SUNRISE BOULEVARD PLANTATION,FL 33313	59-1766701	501(C)(3)	239,375				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SOUTH FLORIDA JEWISH ACADEMY 4640 NW 74 PLACE COCONUT CREEK, FL 33073	65-0635581	501(C)(3)	7,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE BETH EL 1351 S 14TH AVENUE HOLLYWOOD,FL 33020	59-0794397	501(C)(3)	7,888				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE BETH EMET 4807 SOUTH FLAMINGO ROAD COOPER CITY, FL 33330	59-1707916	501(C)(3)	36,559				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE BETH TORAH 9101 NW 57TH STREET TAMARAC, FL 33351	59-1405955	501(C)(3)	5,204				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE DOR DORIM 2360 GLADES CIRCLE WESTON, FL 33326	65-0651401	501(C)(3)	6,285				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE KOL AMI 8200 PETERS ROAD PLANTATION, FL 33324	23-7449716	501(C)(3)	22,594				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TEMPLE SINAI 1400 N 46 AVE HOLLYWOOD,FL 33021	59-0791032	501(C)(3)	12,740				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TRUSTEES OF THE UNIV OF PENN SCHOOL OF VET MED 3800 SPRUCE STREET 172E PHILADELPHIA,PA 19104	23-1352685	501(C)(3)	5,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 220 SOUTH 33RD STREET PHILADELPHIA,PA 19104	23-1352685	501(C)(3)	11,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF PITTSBURGH 4200 FIFTH AVENUE PITTSBURGH, PA 15260	25-0965591	501(C)(3)	7,500				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UJA FEDERATION 6900 JERICHO SYOSSET, NY 11791	51-0172429	501(C)(3)	5,500				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

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WEINBAUM YESHIVA HIGH SCHOOL OF BOCA 7902 MONTTOOYA CIRCLE BOCA RATON, FL 33433	65-0781573	501(C)(3)	33,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG ISRAEL SYNAGOGUE OF HOLLYWOOD INC 3291 STIRLING ROAD FORT LAUDERDALE, FL 33312	59-1665301	501(C)(3)	25,700				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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YOUNG ISRAEL OF GREATER MIAMI 990 NE 171ST STREET NORTH MIAMI BEACH, FL 33162	59-6033985	501(C)(3)	5,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HILLEL INTERNATIONAL SCHUSTERMAN INTERNATIONAL CENTER 800 8TH STREET NW WASHINGTON,DC 200013724	52-1844823	501(C)(3)	31,000				GRANTS TO SOCIAL WELFARE AND EDUCATIONAL INSTITUTIONS WHOSE ACTIVITIES ARE CONSISTENT WITH THE GOALS AND PURPOSES OF THE FEDERATION

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC

Employer identification number
59-0967823

Part 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 in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in 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		No
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		No
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☒ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☒ Written employment contract ☐ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		No
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	Yes	
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III		No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?		No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III		No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Note. The sum of columns (B)(i)-(iii) 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)ERIC STILLMAN PRESIDENT & CEO	(i)	275,361	0	24,211	19,000	24,233	342,805	0
	(ii)	0	0	0	0	0	0	0

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

Return Reference	Explanation
PART I, LINE 1A	PER EMPLOYMENT AGREEMENT, ERIC STILLMAN, CEO RECEIVES A REAL ESTATE SUPPLEMENT OF \$1,000 PER MONTH

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization UNITED JEWISH COMMUNITY OF BROWARD COUNTY INC	Employer identification number 59-0967823
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	RICHARD AND LESLIE LINEVSKY ARE HUSBAND AND WIFE FRANKLIN AND KAREN ZEMEL ARE HUSBAND AND WIFE
FORM 990, PART VI, SECTION A, LINE 7A	THE SLATE OF DIRECTORS TO BE PRESENTED BY THE NOMINATING COMMITTEE TO THE GENERAL MEMBERSH IP SHALL BE PUBLISHED IN A NEWSPAPER OF GENERAL CIRCULATION IN BROWARD COUNTY , OR IN A PER IODICAL PUBLISHED BY OR ON BEHALF OF THE FEDERATION, AT LEAST THIRTY (30) DAYS PRIOR TO TH E GENERAL MEMBERSHIP MEETING ADDITIONAL NOMINATIONS FOR ANY DIRECTOR MAY BE MADE BY FILIN G OF A PETITION CONTAINING THE SIGNATURE OF ONE HUNDRED (100) MEMBERS OF THE WJCBC
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS REVIEWED BY EXECUTIVE MANAGEMENT AND THE AUDIT COMMITTEE AND APPROVED BEFO RE IT IS FILED BY THE INDEPENDENT ACCOUNTANTS WHO PREPARED THE RETURN THE BOARD OF DIRECT ORS ARE PROVIDED A COPY OF THE FORM 990 AT THE BOARD MEETING BEFORE THE TAX RETURN IS FILE D
FORM 990, PART VI, SECTION B, LINE 12C	WHEN A MATTER WHERE A CONFLICT EXISTS BECOMES A MATTER OF BOARD COMMITTEE ACTION THE MEMBE R IS NOT PERMITTED TO VOTE OR USE PERSONAL INFLUENCE ON THAT MATTER EACH BOARD MEMBER IS REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT ON AN ANNUAL BASIS
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE REVIEWS COMPARABILITY DATA FROM WJC AND APPROVES COMPENSATION DECISIONS
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVA ILABLE TO THE PUBLIC THE ORGANIZATION MAKES ITS FORM 990 TAX RETURN AVAILABLE TO THE PUBL IC VIA ITS WEBSITE, GUIDESTAR'S WEBSITE AND UPON REQUEST THE ORGANIZATION MAKES ITS FINAN CIAL STATEMENTS AVAILABLE TO THE PUBLIC VIA ITS WEBSITE
PART XII, LINE 2C	NO CHANGES