SCANNED NOV 1 4 2017

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

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

Dep:	artment of th	e Treasury		ocial security numbers on		-	=		Inspection
	nal Revenue			bout Form 990 and its inst					
<u> </u>			ndar year, or tax year begin		, 2016, a	and ending	Decem	ber 31	, 20 16
В	Check if ap	plicable	C Name of organization The Je	rusalem Foundation				D Employe	er identification number
╛	Address ch	ange	Doing business as						31 1529945
_	Name chan	ige	Number and street (or P O box	x if mail is not delivered to stree	et address)	Room/suite	,	E Telephor	ne number
	Initial return	ו	11 Rivka Str. POB 10185					_	972-2-6751711
	Final return/t	terminated	City or town, state or province,	, country, and ZIP or foreign por	stal code				
	Amended r	eturn .	Jerusalem 9110101 Israel					G Gross re	ceipts \$ 58,974,534
	Application	pending	F Name and address of principal	officer			H(a) Is this a gr	oup return for	subordinates? Yes Vo
							H(b) Are all s	ubordinates	s included? Ves No
1	Tax-exemp	t status	✓ 501(c)(3))1(c)() ◀ (insert no)	4947(a)(1) or	527	If "No	o," attach a	list (see instructions)
J	Website:	> www	v.jerusalemfoundation.org				H(c) Group	exemption	number ▶
ĸ	Form of org			sociation Other >	L Yea	ar of formatio	n 1982	M State	of legal domicile
Р	art I	Summa	arv	-	,			·	<u>v</u>
			scribe the organization's i	mission or most significa	nt activities:				
ė	1		alem Foundation creates of				ulnorable D	onulation	e Dialogue and
auc	1		ving, Arts and Culture, Heri		10.010H41, E	100000011, 4	uniciable i	opulation	is, Dialogue and
Ĕ			s box ▶☐ if the organiza		rations or di	snosed of	more than	25% of	ite nat secate
Š	1		of voting members of the			oposed of	more triain	3	
ري حم			-			line 1b)		4	16
Activities & Governance	1		of independent voting mer					5	16
			nber of individuals employ	•	o (Fait V, line	; Za)			0
	1		ber of volunteers (estimate					6	0
⋖	1		elated business revenue fr					7a	0
	b N	let unrela	ated business taxable inco	ome from Form 990-1, lii	ne 34			7b	0
						_	Prior Ye	ar	Current Year
ō	8 C	ontribut	ions and grants (Part VIII,	line 1h)			29	,178,962	25,576,074
盲	9 P	rogram:	service revenue (Part VIII,	line 2g)				0	0
Revenue	10 Ir	nvestmei	nt income (Part VIII, colum	nn (A), lines 3, 4, and 7d)			1	,353,175	2,301,655
4	11 C	ther rev	enue (Part VIII, column (A)), lines 5, 6d, 8c, 9c, 10c	, and 11e) .			225	1,959,864
	12 T	otal reve	enue-add lines 8 through	11 (must equal Part VIII, o	column (A), lii	ne 12)	30	,532,362	29,837,593
	13 G	arants ar	nd similar amounts paid (F	Part IX, column (A), lines	1–3)		30	,429,422	26,532,362
	14 B	enefits p	oald to or for members (Pa	art IX, column (A), line 4)				0	0
S	15 S	alaries, c	other compensation, emplo	yee benefits (Part IX, colu	mn (A), lines	5–10)	3	,204,899	3,337,052
Expenses	16a P	rofessio	nal fundraising fees (Part	IX. column (A), line 11e)		🗀 🥅		277,781	203,361
ē			draising expenses (Part IX	• • • • • • • • • • • • • • • • • • • •	-				
Щ			penses (Part IX, column (A		i≕Ol		1	,044,281	2,346,119
			enses. Add lines 13–17 (n			5) -		,956,383	32,418,894
			less expenses Subtract li		8()1	" 		424,021)	
_ 4		.ovoriue	1000 Oxportood Gubtiact II			Be	ginning of Cu		(2,581,301) End of Year
Net Assets or Fund Balances	20 T	ntal acc	ets (Part X, line 16)	OCT 2 0 50	12	F		,538,076	
SSE	21 T		ilities (Part X, line 26)	OGDEN.	TT 1	· ·			111,215,569
	22	let eenet	ts or fund balances. Subtr	DEN DEDEN	. المستنسب	· ·		,741,206	7,214,842
_				adt line zurrenn-line 20	· · · ·	•	113	<u>,796,870</u>	118,430,411
	art II		ure Block						
			ry, I declare that I have examined ete Declaration of preparer (othe						ny knowledge and belief, it is
		1	oto Bootaranon er proparar (ente	· trial officery to bacoo or an an			<u> </u>		2 0-17
~ :									3 2017
Sig		Signa . 1/	ature of officer	CTC			Dat	ie	
He	ere		MAN UZ-Ari	CFO					
		<u>'</u>	or print name and title					T	T
P۶	aid	Print/Typ	pe preparer's name	Preparer's signature		Date	•	Check [ıf PTIN
	eparer							self-emp	ployed
	se Only	Firm's na	ame ►				Firm	's EIN ▶	
J:	JO Olliy		ddress ►				Pho	пе по	
Ma	y the IRS		this return with the prepa	arer shown above? (see	instructions)				· · Yes No
For	r Paperwo	rk Redu	ction Act Notice, see the se	parate instructions.		Cat No.	11282Y		Form 990 (2016)

	0 (2016)		Page 2										
Part I	· · · · · · · · · · · · · · · · · · ·												
	Check if Schedule O contains a response or note to any line in this Part III	· · · ·	. <u>.</u> 🗸										
	The Jerusalem Foundation creates opportunities for: Economic Growth, Education, Vulnerable Populations, Dialogue and												
	Shared Living, Arts and Culture, Heritage Preservation.												
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		Z Na										
	If "Yes," describe these new services on Schedule O.	⊔ res	▼ 140										
	Did the organization cease conducting, or make significant changes in how it conducts, any program	า											
	services?	☐ Yes	✓ No										
	If "Yes," describe these changes on Schedule O.												
	Describe the organization's program service accomplishments for each of its three largest program service expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all the total expenses, and revenue, if any, for each program service reported.												
4a	(Code:) (Expenses \$ 4,729,845 including grants of \$) (Revenue \$)										
	Greenberg's pool & sports complex - Construction												
4b	(Code:) (Expenses \$ 1,980,000 including grants of \$) (Revenue \$		<u>, </u>										
710	Arazim Valley sports complex - Construction												
40	(Code) (Expenses \$ 1,318,298 including grants of \$) (Revenue \$												
4c	Mishkenot Sha'ananim International Center - General support of seminars & conferences	•••••	'										
	- General support of Press Club												
		·											
4d	Other program services (Describe in Schedule O.)												
10	(Expenses \$ 19,440,593 including grants of \$ 382,221) (Revenue \$)												

art	Checklist of Required Schedules			
4	to the experimentary described in section 501(a)(2) or 4047(a)(1) (athor there a private for addition)(2 if ")(a) "		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_	\	
2 3	ls the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓	
	candidates for public office? If "Yes," complete Schedule C, Part I	3_		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
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_		✓
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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	\	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	a Labracia. Tarri
þ	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		1
С	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		1
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e	✓	1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a	✓	
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	✓	
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	√	
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	1	
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	→	
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		1
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		,
			000	10040

Part	Checklist of Required Schedules (continued)			
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\ <u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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? If "Yes," complete Schedule J	23	√	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	24d 25a	!	1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
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? If "Yes," complete Schedule L, Part II	26		1
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? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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	\	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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		1
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	1	
			900	(2016)

Part '	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			1
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		v
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	JU		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	✓	
b	If "Yes," enter the name of the foreign country: ISRAEL / SWITZERLAND / SPAIN			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	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		✓
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).		·	}
а	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?			
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
	required to file Form 8282?	7c		i
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	_	_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:			
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		'	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			}
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	. 990	
		C	. uuii	(2016)

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	truct	ions.
Socti	Check if Schedule O contains a response or note to any line in this Part VI	• •	•	. 🗸
Secu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 16	Γ		
	If there are material differences in voting rights among members of the governing body, or			t
	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 . 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
3	any other officer, director, trustee, or key employee?	2	✓_	
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		7
6	Did the organization have members or stockholders?	6	✓	<u> </u>
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	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
8	stockholders, or persons other than the governing body?	7b	✓	ļ
0	the year by the following.			
а	The governing body?	8a	/	
b	Each committee with authority to act on behalf of the governing body?	8b	7	
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		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40-	Did the eventual have lead about the short of the stand	40.	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		✓
	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		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			i
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
40	describe in Schedule O how this was done	12c		
13 14	Did the organization have a written whistleblower policy?	13 14		1
15	Did the process for determining compensation of the following persons include a review and approval by			V
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	ļ'
b	Other officers or key employees of the organization	15b	✓	
40	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?	40		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		1
	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		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erect :	nolici	, and
	financial statements available to the public during the tax year.	J. 531	PONO	,, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	•	

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Page 7

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

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

[7]

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	nor any relate	d org	anız	atıo	n c	ompe	nsa	ted any curren	t officer, director	, or trustee.
•	(7)			(C Pos) ition					
(A) Name and Title	(B) Average hours per week (list any	box, office	unles	eck s pe	more rson	than one the thick the thi	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Sallai Merídor	1									
Board Member & Foundation Chairman		1						0	0	
(2) Ruth Cheshin	1				ļ.,					
Board Member & former President		1						0	0	
(3) David Brodet	1			1						
Board Chairman		✓		L			<u></u>	0	0	
(4) Zvi Agmon	0.5									
Board Member		✓						0	0	0
(5) Yoram Belizovsky	0.5)								
Board Member		✓						0	0	
(6) Tamar Ben David	0.5	İ							İ	
Board Member		✓						0	0	
(7) Moshe Vidman	0.5						1			
Board Member		1						0	0	
(8) Prof. Meir Heth	11									
Board Member		✓						0	0	
(9) Gary Leibler	1								ļ	
Board Member		1					L	0	. 0	
(10) Dan Suesskind	1									
Board Member		1				L	L	0	0	
(11) Harry Sapir	1	1								
Board Member		✓						0	0	
(12) Ronit Abramson	0.5									
Board Member		1					L	0	0	
(13) Stuart Hershkowitz	0.5									
Board Member		1				<u> </u>	<u> </u>	0	0	
(14) Dr. Yoni Shimshoni	0.5									
Board Member		✓						0	0	

Part VII Section A. Officers, Di	ilectors, mus	lees, Rey L		,663) C)	igne	<u> </u>	ompensated E	inployees (con	liiidec	<i>''</i>		
(A)		(B)	Position						(D)	(E)			(F)	
Name and title		Average					than o		Reportable	Reportable compensation from related			mated	l
		hours per week (list any	office				or/trust		compensation from				ount of ther	ŗ.
		hours for	Individual to or director	Inst	Officer	ξey	emg	Former	the	organizations		comp	ensatio	on
		related organizations	lirec	rt i	cer	Key employee	hest] mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)		m the nizatio	n
		below dotted	tor tor	onal		Ploy	e con		(00-271099-101100)			_	related	
		line)	trustee	Institutional trustee		8	pen					organ	ızatıor	ıs
				tee			Highest compensated employee		L					
(15) Alan Hassenfeld Board Member		1	1						0		0	_		0
(16) Johanna Arbib	 -	50									1			
President					✓	L		L	163,337		o			7,615
(17) Daniel Mimran		50											-	
Former CEO						L		✓	147,234		0			5,988
(18) Anat Tzur		50	1	}	1	,					_			
CEO			ļ	-	_	✓			18,051		0			1,147
(19) David Kindler Former CFO		50						/	86,324		0			2 600
(20) Yinon Oz Ari		50		-				<u> </u>	80,324		0			3,690
CFO						1			49,885		0			3,142
(21) Hedva Foguel		40	-					1	50.054					
Former Legal Advisor (22) Arie Zehavy		50	 	\vdash	+-			۲	53,054		0			2,151
Fund-Raiser Head of Spanish speak		30					1		121,788		0			4,574
(23) Irene Polak		50	İ		Ì				12.7,100		1			4,014
Fund-Raiser Head of German speaki	ng Countries					L	1		102,439		0			4,685
(24)														
(25)						_					+			
		<u> </u>	<u></u>			<u> </u>	<u> </u>	_	ļ		<u> </u>	_		
1b Sub-total	 haata ta Dad	 ./// Contin		٠		•	•		742,112		+-			32,992
c Total from continuation s d Total (add lines 1b and 1c				•	•		•		742,112		+-			22 002
2 Total number of individuals								2) W			<u> </u>			32,992
reportable compensation fr					- 1131				6					
3 Did the organization list a	ny former of	fficer direc	etor o	or tr	rueta	90	kev d	amr	olovee or high	est compens	ted		Yes	No
employee on line 1a? If "Ye												3	Ī	
4 For any individual listed on	line 1a, is the	e sum of re	porta	ble	con	npei	nsatio	n a	and other comp	ensation from	the			
organization and related	organizations	greater th	an \$	150,	,000	? /	f "Ye	s,"	complete Sch	nedule J for s	uch	_	_	
ındıvıdual				•	•			•				4	1	Ĺ
5 Did any person listed on lin for services rendered to the										zation or individ	duai] 5		
Section B. Independent Contrac	tors													
 Complete this table for you compensation from the org 														lax
year.														
Name	(A) and business add	dress							(B) Description of s	ervices	Co	(C) ompens	ation	
NONE														
								_						
								-						
2 Total number of independ	dent contracto	ors (includi	na bi	ut n	ot	lımıt	ed to	L th	nose listed abo	ove) who				
received more than \$100,00								••		-,				1
												Fon	ո 990	0 (2016)

Part	VIII	Statement of Revenue											
		Check if Schedule O	contains a resp	onse or note to				· · · · □					
;] }					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514					
nts	1a	Federated campaigns	1a										
Gra Dough	b		1b					!					
A ft	C	Fundraising events	1c										
<u> </u>	d	Related organizations Government grants (con											
ons	e f	All other contributions, g		900,175									
her		and similar amounts not inc		24,675,899									
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions includ		2 1,07 0,000									
Col	h	Total. Add lines 1a-1	<u>f</u> <u>.</u>	>	25,576,074								
ue				Business Code									
ever	2a				3								
e B	b												
NC.	C						··-						
n Se	d e												
Program Service Revenue	f	All other program sen	vice revenue .										
Pro	g	Total. Add lines 2a-2		>				1					
	3	Investment income		ends, interest,			-						
		and other similar amo	•		2,329,720	2,329,720							
	4	Income from investmen	t of tax-exempt bo	ond proceeds									
	5	Royalties	(i) Real	(ii) Personal	687,104	687,104		 ;					
	6a	Gross rents	815,645	(1) (1) (1)									
	b	Less: rental expenses	59,160					!					
	С	Rental income or (loss)	756,485										
	d	Net rental income or	<u> </u>	>	756,485	756,485							
	7a	Gross amount from sales of	(i) Securities	(II) Other									
		assets other than inventory	29,004,736	44,979				,					
	b	Less: cost or other basis and sales expenses	20.047.202	20.407									
	С	Gain or (loss)	29,047,293 (42.557)	30,487 14,492									
	d	Net gain or (loss) .		▶	(28,065)	(28,065)		i					
venue	8a	Gross income from fu	ındraising		,			1					
Other Reve		events (not including \$ of contributions reported See Part IV, line 18		!									
흝	b	Less: direct expenses											
O		Net income or (loss) f			ĺ		-						
	9a	Gross income from ga See Part IV, line 19	aming activities										
	b	Less: direct expenses				_	-						
		Net income or (loss) f		vities .				 					
		Gross sales of in returns and allowance	es a										
	b	Less: cost of goods s Net income or (loss) f				-							
	- c	Miscellaneous P		Business Code				 					
	11a	unrealized gain(loss) i			516,275	516,275		 					
	b	umounted gammossy.											
	С												
	d	All other revenue .											
	e 10	Total. Add lines 11a-		💆	516,275								
	12	Total revenue. See II	ารเกนตแบกร	<u> P</u>	29,837,593	<u>4,261,519</u>		Form 990 (2016)					

Do not	Check if Schedule O contains a respons include amounts reported on lines 6b, 7b,		(B)	(C)	· · · · L
b, 9b,	and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	26,532,362	26,532,362		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	541,620	125,388	222,904	193,32
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,625,213	554,855	358,927	711,43
•		233,209	82,804	50,353	100,05
9	Other employee benefits	628,272	72,888	249,207	306,17
10 11 a	Payroll taxes	308,738	100,439	80,932	127,36
b	Legal	14,700		14,700	
c d	Accounting Lobbying	47,704		47,704	
е	Professional fundraising services. See Part IV, line 17	203,361			203,36
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	6,455		6,455	
12	Advertising and promotion	152,545			152,54
13	Office expenses	114,792		103,019	11,77
14 15	Information technology	74,105		74,105	
16	Occupancy	88,029		88,029	
17 18	Travel	204,652		31,557	173,09
19	Conferences, conventions, and meetings .	1,394,271			1,394,27
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	185,025		185,025	
23	Insurance	17,851		17,851	
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)				
а	other miscellaneous	45,990		45,990	·
b					
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	32,418,894	27,468,736	1,576,758	3,373,40
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)				
	101101111119 001 00 2 (100 000 120)				Form 990 (201

	art X	,			Page II
	31 C A	Check if Schedule O contains a response or note to any line in this Par	t X .		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	3,830,045	1	4,113,115
	2	Savings and temporary cash investments	3,201,506	-	2,355,502
	3	Pledges and grants receivable, net	30,619,827	3	28,788,965
	4	Accounts receivable, net	378,154	4	418,524
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		ř	
6	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	0	5	0
Assets	7	Notes and loans receivable, net	3,752,605		3,686,850
Ass	8	Inventories for sale or use	3,732,809	8	
•	9	Prepaid expenses and deferred charges	8,324	- 	0 14,683
	10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D 10a 7,980,874	0,324		14,003
	b	Less: accumulated depreciation . 10b 2,447,616	5,574,392	10c	5,533,258
	11	Investments—publicly traded securities	71,083,685		69,510,434
	12	Investments—other securities. See Part IV, line 11	198.142		117,684
	13	Investments—program-related See Part IV, line 11	0	-	0
	14	Intangible assets	0	-	
	15	Other assets See Part IV, line 11	3,891,396	15	3,891,396
	16	Total assets. Add lines 1 through 15 (must equal line 34)	122,538,076		118,430,411
	17	Accounts payable and accrued expenses	5,412,617		4,502,396
	18	Grants payable	2,085,008		2,012,736
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities [0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D .	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
iab		disqualified persons. Complete Part II of Schedule L	0		0
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	1,243,581	25	699,710
	26	Total liabilities. Add lines 17 through 25	8,741,206	26	7,214,842
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			_
an	27	Unrestricted net assets	37,165,882		35,125,534
Ba	28	Temporarily restricted net assets	46,731,116		46,319,254
Net Assets or Fund Balances	29	Permanently restricted net assets	29,899,872	29	29,770,781
ış	30	Capital stock or trust principal, or current funds	0	30	0
Se	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	
As	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
Ě	33	Total net assets or fund balances	113,796,870	33	111,215,569
_	34	Total liabilities and net assets/fund balances	122,538,076		118,430,411

01111 33	0 (2010)	_		Pa	age 12
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		29,83	37,593
2	Total expenses (must equal Part IX, column (A), line 25)	_2			18,894
3	Revenue less expenses. Subtract line 2 from line 1	3		(2,58	1,301)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		113,79	6,870
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
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		111,21	15,569
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," ex	plaın ır	า		
	Schedule O.]	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled o	r		
	reviewed on a separate basis, consolidated basis, or both				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				'
b	Were the organization's financial statements audited by an independent accountant?		. 2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	a		
	separate basis, consolidated basis, or both:				1 :
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		<u></u>		أحيا
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent according	untant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	kplaın ır	า		
	Schedule O.			'	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	า 📄 🗀		
	the Single Audit Act and OMB Circular A-133?		. 3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?		э		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			For	m 990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

The J	erusalem Foundation						29945
Pai	t I Reason for Public Char	ity Status (All	organizations must	comple	te this p	art.) See instructio	ns.
The o	organization is not a private founda	tion because it is	s: (For lines 1 through	12, chec	k only or	ne box.)	
1	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 (F	orm 990	or 990-E	Z).}	
3	A hospital or a cooperative hos						
4	A medical research organization		onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and state						
5	An organization operated for t section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit described in
6	A federal, state, or local govern						
7	An organization that normally			port from	a gover	nmental unit or fron	the general public
	described in section 170(b)(1)	(A)(vi). (Complet	e Part II.)				
8	A community trust described in			•			
9	An agricultural research organi or university or a non-land-grai university:						
10	An organization that normally receipts from activities related support from gross investment acquired by the organization at	to its exempt fui income and uni	nctions—subject to co related business taxal	ertain exc ble incom	ceptions, ne (less si	and (2) no more tha ection 511 tax) from	n 331/3% of its
11	An organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).	
12	An organization organized and	operated exclus	ively for the benefit of	f, to perfo	orm the fu	unctions of, or to car	ry out the purposes
	of one or more publicly suppo						
	Check the box in lines 12a thro	ugh 12d that des	scribes the type of sup	porting o	organizati	on and complete line	es 12e, 12f, and 12g
а							
	the supported organization					he directors or trust	ees of the
	supporting organization. You	-	•				
b							
	control or management of to organization(s) You must on				persons	that control or man	age the supported
C	Type III functionally integral its supported organization(s)		• • •			•	ally integrated with,
d	I ☐ Type III non-functionally i	ntegrated. A su	pporting organization	operated	d in conne	ection with its suppo	orted organization(s)
	that is not functionally integ						
	requirement (see instruction	ns). You must c	omplete Part IV, Sec	tions A a	and D, ar	nd Part V.	
e	□ Check this box if the organ	zation received	a written determination	on from ti	ne IRS th	at it is a Type I, Type	e II, Type III
	functionally integrated, or T	ype III non-func	tionally integrated sur	oporting (organızat	ion.	
f	Enter the number of supported of	rganizations .					[]
g	Provide the following information	about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(III) Type of organization			(v) Amount of monetary	(vi) Amount of
			(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
			,		,		
				Yes	No		
(A)					ļ		
				ļ			
(B)							
(C)							
(D)							
(D)							
(E)							
Tata			· · · · · · · · · · · · · · · · · · ·	 	١,	<u> </u>	

Scriedu	HE A (FOITH 990 OF 990-EZ) 2016						Page 2
Part		ations Descri	bed in Secti	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	alify under
	Part III. If the organization fails to	o qualify unde	r the tests lis	<u>ted below, pl</u>	ease comple	te Part III.)	
	on A. Public Support			4		T	
_	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2		31,149,960	43,377,259	34,868,813	29,178,962	25,576,074	164,151,068
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	31,149,960	43,377,259	34,868,813	29,178,962	25,576,074	164,151,068
5	The portion of total contributions by						
	each person (other than a					ŀ	
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						40 505 550
6	Public support. Subtract line 5 from line 4	 					18,587,750
	on B. Total Support	<u></u>					145,563,318
	idar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	31,149,960	43,377,259	34,868,813	29,178,962	25,576,074	164,151,068
8	Gross income from interest, dividends,		, , , , , , , , , , , , , , , , , , , ,	,,		20,010,071	101/101/000
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	3,523,018	3,496,386	3,413,876	2,797,243	3,832,469	17,062,992
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 VI)						
11	· · ·						
12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc	(see instruction	ine)			12	181,214,060
13	First five years. If the Form 990 is for the			third fourth	or fifth tax ve		501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor	t Percentage	•				<u> </u>
14	Public support percentage for 2016 (line			1, column (fl)		14	80.33 %
15	Public support percentage from 2015 Sci					15	72.84 %
16a	331/3% support test-2016. If the organi	zation did not	check the box	on line 13, an	d line 14 is 33	1/3% or more, 0	check this
	box and stop here. The organization qua	lifies as a publi	cly supported	organization			🕨 🗸
b	331/3% support test - 2015. If the organi						
	this box and stop here. The organization	qualifies as a p	publicly suppor	ted organization	on		▶ 🗆
17a	10%-facts-and-circumstances test — 26						
	10% or more, and if the organization me						
	Part VI how the organization meets the "	tacts-and-circu	ımstances" tes	st. The organiz	ation qualifies	as a publicly s	supported
	organization						▶ □
b	10%-facts-and-circumstances test—2	015. If the orga	inization did no	ot check a box	c on line 13, 1	6a, 16b, or 17a	a, and line
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization r supported organization				=	on qualifies as	a publicly
18	Private foundation If the organization di				or 17b, check	this box and a	· · ► 📙

Part III	Support Schedule for Organizations	Described in Section 509(a)(2)
----------	------------------------------------	--------------------------------

(Complete only if you checked	the box on line 10 of Part I	or if the organization	failed to qualify und	er Part II.
If the organization fails to quali				

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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 Amounts included on lines 1, 2, and 3						
74	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						
С	Add lines 7a and 7b			-		,	
8	Public support. (Subtract line 7c from		-			, ×.,	
	line 6.)					,	
Secti	on B. Total Support						_
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
С	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 VI.)						
13	Total support. (Add lines 9, 10c, 11,					-	
	and 12.)						
14	First five years. If the Form 990 is for the	e organization	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop her			<u> </u>	<u> </u>	<u> </u>	<u>, , ▶ □</u>
	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8					15	%
16 Cookii	Public support percentage from 2015 Sch					16	%
<u>5ecτιο</u> 17	on D. Computation of Investment Inc				(6)	1471	
	Investment income percentage for 2016 (Investment income percentage from 2015)					17	<u>%</u>
18 19a	331/3% support tests—2016. If the organi					18 ore than 331/29	% and line
154	17 is not more than 33½%, check this box	and ston here.	The organization	on qualifies as a	ia iiile 13 is M anublicly suppa	orted organizati	
b	33 ¹ / ₃ % support tests—2015. If the organiz						
	line 18 is not more than 331/3%, check this b	oox and stop h	ere. The organi	zation qualifies	as a publicly si	upported organi	zation 🕨 📑
20	Private foundation. If the organization die						

Part IV Supporting Organizations

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

	ion A. All Supporting Organizations		14.	T
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain.		Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a		3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	,-	
С		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	_	and of our constant	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5a 5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	6		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	.54		

determine whether the organization had excess business holdings.)

10b

Schedule	A (Form	qqn	or '	ggn.	-F7)	2016

Page 5

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
ь	A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		 -
	on B. Type I Supporting Organizations		L	L
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	<u> </u>		$\vdash \lnot$
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		1	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Section	on C. Type II Supporting Organizations			
4	Many a manager of the approximate discretization of the state of the s		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations		L.,	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		,	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		┝╌ᆜ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	!		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			l i
	supported organizations played in this regard.	<u> </u>		
Section	on E. Type III Functionally Integrated Supporting Organizations	3		L
1				
-	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	cuons	5).
a b	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in:	structi	ions)
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1 1
	how the organization was responsive to those supported organizations, and how the organization determined	ļ. ļ		
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the]		
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
_		2b		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? Provide details in Part VI .	3a		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gani	izations			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	a tru	st on Nov. 20, 1970 (exp	lain in Part VI). See		
instructions. All other Type III non-functionally integrated supporting organ					
Section A - Adjusted Net Income (A) Prior Year					
1 Net short-term capital gain	1	-			
2 Recoveries of prior-year distributions	2				
3 Other gross income (see instructions)	3				
4 Add lines 1 through 3.	4		, in the second		
5 Depreciation and depletion	5				
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or					
maintenance of property held for production of income (see instructions)	6				
7 Other expenses (see instructions)	7				
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8				
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)					
a Average monthly value of securities	1a	: -:			
b Average monthly cash balances	1b				
c Fair market value of other non-exempt-use assets	1c				
d Total (add lines 1a, 1b, and 1c)	1d				
e Discount claimed for blockage or other			-		
factors (explain in detail in Part VI):					
2 Acquisition indebtedness applicable to non-exempt-use assets	2				
3 Subtract line 2 from line 1d.	3				
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6 Multiply line 5 by .035	6				
7 Recoveries of prior-year distributions	7				
8 Minimum Asset Amount (add line 7 to line 6)	8				
Section C - Distributable Amount			Current Year		
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2 Enter 85% of line 1	2				
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4 Enter greater of line 2 or line 3	4				
5 Income tax imposed in prior year	5	-			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		,			
emergency temporary reduction (see instructions).	6				
7 Check here if the current year is the organization's first as a non-functional instructions)	y int	egrated Type III support	ing organization (see		

Schedule A (Form 990 or 990-EZ) 2016

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	izations (continued)	1 age 7
Secti	on D - Distributions	<u>, , , , , , , , , , , , , , , , , , , </u>		Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	<u></u>		
5	Qualified set-aside amounts (prior IRS approval required)		·	
6	Other distributions (describe in Part VI). See instructions.		·	-
7	Total annual distributions. Add lines 1 through 6.	······································	-	-
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions	h the organization is res	ponsive	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	<u></u>		
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI) See instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
c	From 2013			
<u>d</u>	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
<u>i</u> _	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
<u> </u>	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017 . Add lines 3 _j and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
b	Excess from 2013			
C	Excess from 2014			
<u>d</u>	Excess from 2015			
е	Excess from 2016			-

Schedule A (Form 990 or 990-EZ) 2016

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

OMB No 1545-0047

2016

	usalem Foundation				1 1529945	
Parl				Accour	nts.	
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	<u>.</u>	(h) Euroda	and other a	
4	Total number at and of year	(a) Donor advised funds		(b) Fund:	s and other a	ccounts
1 2	Total number at end of year					
3	Aggregate value of grants from (during year) .				•	
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor	advisors in writing that the assets h	neld in o	donor ac	dvised	
	funds are the organization's property, subject to the					Yes 🗌 No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	nt fund:	s can be	used	
	only for charitable purposes and not for the bene		-	•	rpose	
					· 🗆	Yes 🗌 No
Part		/// " = 000 B . "/ " =				
	Complete if the organization answered		•			
1	Purpose(s) of conservation easements held by the					
	☐ Preservation of land for public use (e g , recrea☐ Protection of natural habitat	·		-	•	
	Protection of natural nabitat Preservation of open space	☐ Preservation o	or a cert	illea nist	oric structi	ure
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contributi	on in th	e form o	f a consen	vation
_	easement on the last day of the tax year.					of the Tax Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easemen	ts		2b		
С	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, tran	sferred, released, extinguished, or ter	minated	by the	organizatio	on during the
	tax year >					
4	Number of states where property subject to conse					
5	Does the organization have a written policy reviolations, and enforcement of the conservation ea			ı, nandıl		W [] N-
6	Staff and volunteer hours devoted to monitoring, inspec				_	Yes 📙 No
U	Stan and volunteer hours devoted to monitoring, inspec	ang, handing of violations, and emorcing	Conserv	alion easi	ements dun	ing the year
7	Amount of expenses incurred in monitoring, inspecting	ng handling of violations, and enforcing	consen	zation ea	sements di	uring the year
•	▶ \$	ig, nationing of trolations, and officing	0011001	ation ou	oomonio at	aring the year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements o	f section	n 170(h)(4)(B)(ı)	
	and section 170(h)(4)(B)(II)?					Yes 🗌 No
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	e and ex	kpense s	tatement,	and
	balance sheet, and include, if applicable, the text of		nancial:	statemer	nts that de	scribes the
	organization's accounting for conservation easem					
Part				' Simila	r Assets.	•
	Complete if the organization answered					
1a	If the organization elected, as permitted under SF					
	works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the					urtnerance o
b	If the organization elected, as permitted under S					nalanca shaq
U	works of art, historical treasures, or other similar					
	public service, provide the following amounts relati	•	adouno	1, 0, 700		artificiarios o
	(i) Revenue included on Form 990, Part VIII, line 1	•		. ▶	\$	
	(ii) Assets included in Form 990, Part X			•	\$	provide the
2	If the organization received or held works of art	, historical treasures, or other simila	r assets	s for fina	ancial gain	, provide the
	following amounts required to be reported under S	SFAS 116 (ASC 958) relating to these i	tems:			
а	Revenue included on Form 990, Part VIII, line 1			. ▶	\$	
b	Assets included in Form 990, Part X			. •	\$	

Cat No 52283D

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

Schedule D (Form 990) 2016

Schedul	e D (Form 990) 2016					Page 2
Part		Collections of A	rt Historical T	reasures or Ot	her Similar Ass	
3	Using the organization's acquisition, a collection items (check all that apply):					
а	Public exhibition		d 🗀 Loan	or exchange prog	rams	
b	☐ Scholarly research		e 🗌 Other			
С	☐ Preservation for future generations	3				
4	Provide a description of the organizat XIII.	ion's collections a	nd explain how th	ney further the org	ganization's exemp	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather	than to be maintai				☐ Yes ☐ No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes"				
1a _	Is the organization an agent, trustee, included on Form 990, Part X?				other assets not	☐ Yes ☐ No
Ь	If "Yes," explain the arrangement in Pa	art Alli and comple	te the following ta	able:	Am	ount
С	Beginning balance			10		- Cont
d	Additions during the year			10		
e	Distributions during the year					······································
f	Ending balance					
2a	Did the organization include an amour	nt on Form 990. Pa	rt X. line 21. for e	· · · · <u>L · · · · · · · · · · · · · · ·</u>		☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa	•			•	_
Par		•				<u> </u>
	Complete if the organization	answered "Yes"	on Form 990, F	Part IV, line 10.		
	-	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	61,196,396	60,018,102	33,400,686	32,260,699	29,985,365
b	Contributions	(473,859)	2,687,601	31,007,655	(9,000)	847,386
C	Net investment earnings, gains, and					
	losses	2,134,637	306,252	(2,982,681)	3,095,023	2,643,187
	Grants or scholarships	0	0	0	0	0
е	Other expenditures for facilities and	•				
	programs	(1,683,112)	(1,554,303)	(1,121,628)	(1,769,102)	(978,792)
f	Administrative expenses	(199,812)	(261,256)	1 1	(176,934)	(236,447)
g	End of year balance	60,974,250	61,196,396			32,260,699
2	Provide the estimated percentage of t	•	_	, column (a)) held	as:	
а	Board designated or quasi-endowmer		! %			
b		2.40%				
С	Temporarily restricted endowment ▶	6.43%	2007			
3a	The percentages on lines 2a, 2b, and Are there endowment funds not in the organization by:	-		at are held and ad	lministered for the	Yes No
	(i) unrelated organizations					3a(i) ✓
	(ii) related organizations					3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as required on So	chedule R?		3b
4	Describe in Part XIII the intended uses					
Par	VI Land, Buildings, and Equip Complete if the organization		on Form 990. F	Part IV, line 11a.	See Form 990. F	Part X, line 10.
	Description of property	(a) Cost or oth	er basis (b) Cost o	or other basis (c)	Accumulated	(d) Book value

1,745,381

5,315,148

920,345

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

1a

b

d

Land . . .

Other . .

Buildings

> 5,533,258 Schedule D (Form 990) 2016

1,929,572

518,044

1,745,381

3,385,576

402,301

Part VII	Investments—Other Securities. Complete if the organization answ	rered "Yes" on For	m 990. Part IV. line	11b. See Form 99	0. Part X. line 12.
	(a) Description of security or category (including name of security)		(b) Book value	(c) Method of Cost or end-of-ye	of valuation
(1) Financial	derivatives			₩	
	neld equity interests	[
(3) Other					
(A)					
(B)				·-	
(C) (D)					
(E)				.	
(F)					
(G)					
(H)			-		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶				
Part VIII	Investments-Program Related		 .'.		
	Complete if the organization answ	ered "Yes" on For	m 990, Part IV, line	11c. See Form 99	0, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method (Cost or end-of-ye	
(1)					
(2)					-
(3)					
(4)					· · · · · · · · · · · · · · · · · · ·
(5)					
<u>(6)</u> (7)					
(8)					
(9)					·
	b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets.			<u> </u>	
	Complete if the organization answ	ered "Yes" on For	m 990, Part IV, line	11d. See Form 99	0, Part X, line 15.
	(a)	Description			(b) Book value
(1)					
(2)					<u> </u>
(3)					·
(4)					
(5)					
(6)					
(8)					
(9)				-	·
	mn (b) must equal Form 990, Part X, co	(B) line 15.)			
Part X	Other Liabilities. Complete if the organization answ	ered "Yes" on For	m 990, Part IV, line	11e or 11f. See Fo	orm 990, Part X,
1.	line 25. (a) Description of liability	(b) Book value			
	ncome taxes	(5) 55511 14155			
	nce pay to employees	69	9,710		
(3)			3,7.13		
(4)					
(5)					
(6)		-			
(7)					
(8)					
(9)	41				
	(b) must equal Form 990, Part X, col (B) line 25.) ▶	69	9,710	- E	
	r uncertain tax positions. In Part XIII, provid				

Schedu	le D (Form 990) 2016				Page 4
Par	•			Return.	
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ı	1		
а	Net unrealized gains (losses) on investments	2a		4	
b	Donated services and use of facilities	2b		↓	
¢	Recoveries of prior year grants	2c		4	
d	Other (Describe in Part XIII.)	2d		- -	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	i		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		į		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4	
b	Other (Describe in Part XIII.)	4b		_	
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XII Reconciliation of Expenses per Audited Financial Staten			er Retur	n.
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	Total expenses and losses per audited financial statements .			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	,	1		
а	Donated services and use of facilities	2a		_	
þ	Prior year adjustments	2b		_	
C	Other losses	2c		1	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	N/A
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ie 18.)		5	
	XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an				
2; Pa	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide any additional i	nformatio	n.
Part V	/ line 4:				
				·	
Endo	wment fund income is used for grants and program cost to promote the purpos	ses of	the Jerusalem Founda	tion.	
					,

Part \	/ line 1b - Endowment Funds:				
Contr	ibutions in column (b) Two years back includes \$ 31,007,655 (included in unres	stricted	d net assets) that have	been rest	tricted by the
	······································				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Board	1.				
	<u>"</u>				
			••••••••		
Negat	tive contributions are a result of: (1)accrual calculations (2)Donor's changing th	ne con	dition of restriction.		
11090					
Dort \	(line 1:				
<u>. al l /</u>	Cline 1:				
The J	erusalem Foundation has no such tax liabilities				

Schedule D (Fo	rm 990) 2016	Page 5
Part XIII	Supplemental Information (continued)	

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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

2016

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.

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

Employer identification number

Name o	f the organization					Employer ic	dentification	number
	rusalem Foundation						1 1529945	_
Part	General Information Form 990, Part IV, line		es Outside	the United States. Compl	lete if the organ	zation ans	wered "Ye	s" on
1	For grantmakers. Does the assistance, the grantees' elegrants or assistance?							□No
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for monito	oring the use o	of its gran	ts and oth	ner
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if additiona	al space is need	led.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specifi service(s) in th	ervice, c type of	(f) To expenditu and inves in the re	ures for stments
(1)	Middle East&North Africa	1		Fund-raising Prog:				
(2)				Grants			15	,380,579
(3)				Constructions		 	11	<u>,151,783</u>
(4)				Mgmt & Gen. Exp.			2	,513,132
(5)				Fund-raising			3	,191,898
(6)								
(7)	Europe	2	2	Fund-raising				103,038
(8)								
(9)	South America	1	1	Fund-raising				2,087
(10)								
(11)						_		
(12)								
(13)					<u>. </u>			
(14)								
(15)								
(16)								
(17)								
3a b	Sub-total						32	,342,517
c	sheets to Part I						32	.342.517

(4) See Following (d) Purpose of (e) Amount of (f) Again acade (d) Each grant (d) Amount of cash grant (d) See Following (d) Grant (d) See Following (d) Grant (d) Gra	(f) Manner of (g) Amount of (h) cash noncash of noncash of noncash assistance	_
SEE FOLLOWING SEE FOLLOWING SEE FOLLOWING		(h) Description of method of of noncash assistance (book, FMV, appraisal, other)
SEE FOLLOWING SEE FOLLOWING		
SEE FOLLOWING SEE FOLLOWING		
SEE FOLLOWING SEE FOLLOWING		
(5) (7) (7) (8) (9) (10) (11) (12)		
(6) (7) (8) (9) (10) (11) (12)		
(7) (8) (9) (10) (11) (12)		
(9) (10) (11) (12)		
(10) (11) (12) (13)		
(10) (11) (12) (13)		
(11) (12)		
(12)		
(13)		
(14)		
(15)		
(16)		

Schedule F (Form 990) 2016

Part Continuation of	Grants and Ot	her Assistan	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)), Part III)		
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	Planning & Construction of pool & sports complex	7,870,509	check or Bank transfer			
		Middle East & North Africa	Maintenance and renovation, General support- exhibits, seminars & conferences	3,924,409	check or Bank transfer			
		Middle East & North Africa	Construction of sports complex	1,960,000	check or Bank transfer			
		Mıddle East & North Africa	Renovation & Equipment of Coexistence Center + General support	1,878,796	check or Bank transfer			
		Middle East & North Africa	General support	1,679,150	check or Bank transfer			
		Mıddle East & North Africa	Construction & Maintenance of Park	1,663,544	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	1,575,030	check or Bank transfer			
		Mıddle East & North Africa	Maintenance of Parks & Gardens, Education & community General Support	1,500,569	check or Bank transfer			
		Mıddle East & North Afrıca	General Support and Scholarship Subsidies	1,405,381	check or Bank transfer			
		Middle East & North Africa	Construction & facilities and General support - Jerusalem Cinematheque	1,118,559	check or Bank transfer			
		Middle East & North Africa	Planning & Construction of classrooms in High School, Education enrichment & General support	1,026,971	check or Bank transfer			
		Mıddle East & North Afrıca	General Support	1,011,030	check or Bank transfer			:
		Mıddle East & North Afrıca	Renovation & Equipment of day-care center for visually impaired children	1,005,972	check or Bank transfer			
		Mıddle East & North Afrıca	Research Grants & General support	858,000	check or Bank transfer			
		Middle East & North Africa	Education enrichment	769,034	check or Bank transfer			
		Middle East & North Africa	General Support and Exhibits of Museum	757,166	check or Bank transfer			
		Mıddle East & North Afrıca	General Support and Exhibits of Museum	720,276	check or 720,276 Bank transfer			

Page 1

Part II Continuation of	Grants and Oth	ner Assistan	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)	tes. (Schedule	F (Form 990)	Part II)		
e of Org	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	nt of sh	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	Education Activities at Bretter Laboratories, High Schools Oriented Studies	700,361	check or Bank transfer			
		Middle East & North Africa	Planning & Construction of hall at community center	565,686	check or Bank transfer			
		Middle East & North Africa	General Support	474,117	check or Bank transfer			
		Middle East & North Africa	Scholarships	469,993	check or Bank transfer			
		Middle East & North Africa	Activities at Music Center	468,444	check or Bank transfer			
		Middle East & North Africa	Construction & Maintenance of Park	464,021	check or Bank transfer			
		Middle East & North Africa	Education enrichment and cultural activities	452,300	check or Bank transfer			
		Middle East & North Africa	General support	375,205	check or Bank transfer			
		Middle East & North Africa	Vocational training programs	360,588	check or Bank transfer			
		Middle East & North Africa	General Support and Enrichment Activities	348,465	check or Bank transfer			
		Middle East & North Africa	Activities at Music Center	345,317	check or Bank transfer			
		Middle East & North Africa	Planning & Construction of Theatre, General Support & Subsidies for activities	334,980	check or Bank transfer			
		Middle East & North Africa	Renovations & Educational Activities	334,407	check or Bank transfer			
		Mıddle East & North Afrıca	General support	301,990	check or Bank transfer			
		Middle East & North Africa	General Support and Cultural Activities of Botanic Garden	296,308	check or Bank transfer			
		Middle East & North Africa	Sport activities for youth	293,276	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	258,810	check or Bank transfer			
		Mıddle East & North Africa	Education Activities	258,006	check or Bank transfer			

Part II Con	tinuation of	Continuation of Grants and Other Assistance or En	ner Assistand	e or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)	, Part II)		
e of Org	ation	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Middle East & North Africa	General Support and Exhibits of Museum	255,443	check or Bank transfer			
			Middle East & North Africa	Activities at Community Center	245,822	check or Bank transfer			
			Middle East & North Africa	General Support	236,590	check or Bank transfer			
The state of the s			Mıddle East & North Afrıca	General Support	227,358	check or Bank transfer			
			Mıddle East & North Africa	Activities at Community Center	207,750	check or Bank transfer		:	
			Middle East & North Africa	General Support and Subsidies for Theatre culture activities	202,907	check or Bank transfer			
			Middle East & North Africa	General support-seminars and conferences	179,858	check or Bank transfer			
			Middle East & North Africa	General support for dance	179,332	check or Bank transfer			
			Middle East & North Africa	General Support and Subsidies for Theatre culture activities	175,671	check or Bank transfer			
			Mıddle East & North Afrıca	Renovation of kindergarden	171,687	check or Bank transfer			
			Middle East & North Africa	Youth mouvement activities	170,062	check or Bank transfer			
			Middle East & North Africa	Maintenance of Gardens	164,382	check or Bank transfer			
			Mıddle East & North Afrıca	Renovation of kindergarden	162,698	check or Bank transfer			
			Mıddle East & North Afrıca	Renovations & Cultural activities	160,065	check or Bank transfer			
			Mıddle East & North Afrıca	Support American Football stadium	158,918	check or Bank transfer			
			Middle East & North Africa	General Support/Enrichment Activities for Elderly	151,669	check or Bank transfer			
			Mıddle East & North Africa	Coexistence activities	151,555	check or Bank transfer			
			Mıddle East & North Afrıca	General Support	150,159	check or Bank transfer			
34/S7				Page 3					

Part II Continuation of	Grants and Ot	her Assistand	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)), Part II)		
e of Orç	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	Renovations, Equipment & activities at community center for elderly	148,678	check or Bank transfer			
		Middle East & North Africa	Cultural activities	138,304	check or Bank transfer			
		Middle East & North Africa	Maintenance of Gardens	136,090	check or Bank transfer			
		Mıddle East & North Africa	General Support	132,807	check or Bank transfer			
		Middle East & North Africa	Maintenance and gardening	128,174	check or Bank transfer			
		Mıddle East & North Africa	Activities at Community Center	126,972	check or Bank transfer			
		Mıddle East & North Afrıca	General support	126,651	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	118,084	check or Bank transfer			
		Middle East & North Africa	General Support and Scholarship Subsidies	115,196	check or Bank transfer			
		Middle East & North Africa	General support	115,139	check or Bank transfer			
		Middle East & North Africa	Funding High School Oriented Studies	113,159	check or Bank transfer			
		Middle East & North Africa	General Support/Enrichment Activities for children with special needs	100,882	check or Bank transfer			
		Middle East & North Africa	Cultural activities	98,773	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	76,931	check or Bank transfer			
		Middle East & North Africa	Art Scholarships	68,196	check or Bank transfer			!
		Middle East & North Africa	General support	66,826	check or Bank transfer			
		Middle East & North Africa	Coexistence activities	64,709	check or Bank transfer			
		Middle East & North Africa	Scholarships	63,109	check or 63,109 Bank transfer			
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Part II Continuation of Grants and Other Assistance or Enti	Grants and Ot	her Assistan	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)), Part II)		
e of Orç	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	Cultural events in Jerusalem	61,360	check or Bank transfer			
		Middle East & North Africa	General support	59,561	check or Bank transfer			
		Middle East & North Africa	Maintenance of Gardens	58,214	check or Bank transfer			
		Middle East & North Africa	Mozaıka mural	55,243	check or 55,243 Bank transfer			
		Mıddle East & North Afrıca	Enrichment Activities and Subsidies for Treatment for Children with special Needs	54,071	check or Bank transfer			
		Middle East & North Africa	General support	52,434	check or Bank transfer			
		Middle East & North Africa	Maintenance of Gardens	52,144	check or Bank transfer			
		Middle East & North Africa	General support	50,177	check or Bank transfer			
		Middle East & North Africa	Activities at Music & Dance Center	49,927	check or Bank transfer			
		Middle East & North Africa	Renovation of school	49,569	check or Bank transfer			
		Middle East & North Africa	Cultural activities	47,417	check or Bank transfer			
		Middle East & North Africa	General Support and Subsidies for Theatre culture activities	46,920	check or Bank transfer			
		Mıddle East & North Afrıca	General support for dance	46,820	check or Bank transfer			
		Middle East & North Africa	Enrichment programs	43,015	check or Bank transfer			
		Mıddle East & North Afrıca	Activities at Community Center	42,583	check or Bank transfer			
		Middle East & North Afrıca	Cultural activities	42,353	check or Bank transfer			
		Mıddle East & North Afrıca	Co-existence activities	39,756	check or 29,756 Bank transfer			

Part II Continuation of	f Grants and Ot	her Assistan	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)), Part II)		
e of Org	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	Enrichment programs	39,058	check or Bank transfer			
		Middle East & North Africa	General support for art school	38,076	check or Bank transfer			
		Middle East & North Africa	General Support	37,801	check or Bank transfer			
		Middle East & North Africa	General support	37,206	check or Bank transfer			
		Middle East & North Africa	General support	33,909	check or Bank transfer			
		Middle East & North Africa	Construction of Multidisciplinary Center for children with hearing impairments	33,859	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	33,711	check or Bank transfer			
		Middle East & North Africa	General support battered women's shelter	33,440	check or Bank transfer			:
		Middle East & North Africa	Renovation of community center for elderly in the old city	31,462				
		Mıddle East & North Afrıca	General support battered women's shelter	30,722	check or Bank transfer			
		Middle East & North Africa	Equipment & activities	30,589	check or Bank transfer			
		Mıddle East & North Africa	Education enrichment and cultural activities for the ultra-orthodox community	27,209	check or Bank transfer			
		Middle East & North Africa	Education Activities at Bretter Laboratories, High School Oriented Studies	24,920	check or 24,920 Bank transfer			
		Middle East & North Africa	Planning of Co-existence youth center	24,059	check or Bank transfer			
		Middle East & North Africa	Equipment & activities at community center for elderly	23,367	check or Bank transfer			
		Middle East & North Africa	General support	21,340	check or Bank transfer			
		Middle East & North Africa	Scholarships	20,877	check or Bank transfer			
		Middle East & North Africa	Renovation & Equipment for School	20,733	check or Bank transfer			
31:			Page 6					

Part Continuation of	Grants and Oth	ner Assistanc	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)	ites. (Schedule I	F (Form 990)), Part II)		
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	General support	19,936	check or Bank transfer			
		Middle East & North Africa	Schoolarships	19,910	check or Bank transfer			
		Middle East & North Africa	General support	19,564	check or Bank transfer			
		Middle East & North Africa	General support	19,449	check or Bank transfer			
		×	General support	18,081	check or Bank transfer			
		Middle East & North Africa	Coexistence activities	17,813	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	17,665	check or Bank transfer			
		Middle East & North Africa	Coexistence activities	17,514				
		Middle East & North Africa	General support	17,197	check or Bank transfer			
			Hot Meals	16,968	check or Bank transfer			
		ay.	General Support and Scholarship Subsidies	16,281	check or Bank transfer			•
		Middle East & North Africa	General Support and Subsidies for Theatre culture activities	15,357	check or Bank transfer			
		يد	Enrichment programs	14,717	check or Bank transfer			
		Middle East & North Africa	Coexistence activities	14,690	check or Bank transfer			
		Middle East & North Africa	Equipment of school for visually impaired children	14,412	check or Bank transfer			
		Middle East & North Africa	General Support and Subsidies for Theatre culture activities	14,249	check or Bank transfer			
		Middle East & North Africa	Schoolarships	13,757	check or Bank transfer			
		Middle East & North Africa	Enrichment Activities and Subsidies for Treatment for Children with special Needs	12,616	check or 12,616 Bank transfer			
28/57			Page 7					

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Part II Continuation of Grants and Other Assistance or Entit	Grants and Otl	her Assistan	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)), Part II)		
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	planning an auditorium at Herzl Museum	12,516	check or Bank transfer			
		Middle East & North Africa	General Support and Subsidies for Theatre culture activities	12,479	check or Bank transfer			
		Middle East & North Africa	General support	12,292	check or Bank transfer			
		Middle East & North Africa	General support for dance	12,142	check or Bank transfer			
		Middle East & North Africa	General Support and Subsidies for Theatre culture activities	11,687				
		Middle East & North Africa	General support	11,387	check or Bank transfer			
		Middle East & North Africa	Maintenance of Gardens	10,428	check or Bank transfer			
		Middle East & North Africa	Coexistence activities	10,406	check or Bank transfer			
		Middle East & North Africa	General support	9,935				
		Middle East & North Africa	General support	9,536	check or Bank transfer			
		Middle East & North Africa	General Support and Scholarship Subsidies	9,318				
		Middle East & North Africa	Activities at Community Center	9,112	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	960'6	check or Bank transfer			
		Middle East & North Africa	Scholarships	8,766	check or Bank transfer			
		Middle East & North Africa	General support	8,728	check or Bank transfer		_	
		Middle East & North Africa	General support	8,617	check or Bank transfer			
	The state of the s	Middle East & North Africa	Scholarships	7,810	check or Bank transfer			
		Mıddle East & North Afrıca	cultural activities	7,796	check or 7,796 Bank transfer			

Sartil Continuation of Grants and Other Assistance or En	Grants and Ot	her Assistand	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	tes. (Schedule	- (Form 990)	, Part II)		
e of Org	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	maintenance of therapeutic pool	7,524	check or Bank transfer			
		Middle East & North Africa	Coexistence activities	7,291	check or Bank transfer			
		Middle East & North Africa	cultural activities	7,264	check or Bank transfer			
		Middle East & North Africa	Planning of a statue at the entry to community center	7,240	check or Bank transfer			
		Mıddle East & North Afrıca	Scholarships	6,670	check or Bank transfer			
		Mıddle East & North Africa	Education enrichment	6,564	check or Bank transfer			
		Middle East & North Africa	Enrichment Activities for the Elderly	6,439	check or Bank transfer			
		Mıddle East & North Afrıca	Activities at Community Center	6,417	check or Bank transfer			
		Middle East & North Africa	Scholarships	6,400	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	6,400	check or Bank transfer			
		Middle East & North Africa	Education enrichment	6,363	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	6,244	check			
		Middle East & North Africa	Education enrichment	5,449	check			
		Middle East & North Africa	General support	5,376	check			
		Mıddle East & North Afrıca	General support	5,349	check			
		Mıddle East & North Afrıca	Cultural activities	5,285	check or Bank transfer			
		Middle East & North Africa	General support	5,285	check or Bank transfer			
		Mıddle East & North Afrıca	General support	5,223	check or 5,223 Bank transfer			

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Schedule F (Form 990) 2016

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(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	Middle East & North Africa	General support for dance	5,198	check or Bank transfer			
	Middle East & North Africa	Activities at Community Center	5,131	check or Bank transfer			
	Middle East & North Africa	General support	5,024	check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Mıddle East & North Afrıca			check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Mıddle East & North Afrıca			check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Mıddle East & North Africa			check or Bank transfer			
	Mıddle East & North Afrıca			check or Bank transfer			
	Mıddle East & North Afrıca			check or Bank transfer			
	Middle East & North Africa			check or Bank transfer			
	Mıddle East & North Africa			check or Bank transfer			
	Mıddle East & North Afrıca			check or Bank transfer			
	(if applicable)		Middle East & North Africa Middle East & North Africa	Middle East & North Africa General support for dance Middle East & North Africa Activities at Community Center Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa Middle East & North Africa North Africa Middle East & North Africa North Africa	Middle East &	Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Bank transfer Bank transfer Middle East & Bank transfer Bank transfer Middle East & Bank transfer Bank tr	Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East & Middle East &

Part III Grants and Other A Part III can be duplic	Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed		ne United States.	. Complete if the	organızation ansv	s Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. is needed.	0, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash clashursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Scholarships	Middle East & N.Africa	29	22,424 check	heck			actual amount
(2)							
(3) essential white goods							
(4) for elderly & needy individuals Middle East & N.Africa	Middle East & N.Africa	130			52,136	52,136 distribution of refregerators	
(5)						heaters, washing machines	
(9)						etc	
(2)							
(8) Gift cards for Passover							
(9) to holocaust survivors		420			27,100	27,100 Gift cards	
(10)							
(11)							
(12)	:						
(13)							
(14)							
(15)							
(16)							
(17)							
(18)			<i>j</i>				

Schedule F (Form 990) 2016

art∣	V	Foreign Forms		
1	the o	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	☐ Yes	✓ No
2	may Trus	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to separately file Form 3520, Annual Return To Report Transactions With Foreign its and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign it With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).	☐ Yes	☑ No
3	the o	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To tain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□ No
4	qual Info	s the organization a direct or indirect shareholder of a passive foreign investment company or a lified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, rmation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing d (see Instructions for Form 8621)	☐ Yes	✓ No
5	the	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain eign Partnerships (see Instructions for Form 8865)	☐ Yes	√ No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If s," the organization may be required to separately file Form 5713, International Boycott Report (see ructions for Form 5713; do not file with Form 990)	Yes	√ No

Schedule F (Form 990) 2016

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

Part I line 2:
Procedures for monitoring the use of funds outside the USA include receiving detailed reports from recipients including copies of
expenditure invoices, audited reports, narrative reports of expenditures and results, physical inspection and close supervision by internal or
external supervisors.
Part I line 3:
As for Middle East region see above; as for Europe region; written agreement with fund raisers for a monthly fee, and reimbursement of
expenses on the basis of detailed report & back-up documentation
All amounts are recorded on an accrual basic.
·

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization					Employer identifica	tion number
The Jerusalem Foundation						529945
Part I Fundraising Activitie	s. Complete if th	e organiza	ation ansv	vered "Yes" on Fo	orm 990, Part IV, li	ne 17.
Form 990-EZ filers are						
1 Indicate whether the organiza	tion raised funds t	hrough any	of the follo	owing activities Ch	eck all that apply	,
a Mail solicitations				on of non-governm		
b Internet and email solicitat	ions	f 🔽		on of government	_	
c Phone solicitations		g	_	fundraising events	granto	
d ✓ In-person solicitations		9 -	_ opeciai i	ididiaising events		
2a Did the organization have a w	ritten or oral agree	amont with	any individ	tual (including office	ore directore trueto	00
or key employees listed in For						
		-		-	•	☐ Yes ☐ No
b If "Yes," list the 10 highest pa compensated at least \$5,000			uraisers) pu	ursuant to agreeme	ents under which the	fundraiser is to be
compensated at least \$5,000	by the organizatio	11				
						
(i) Name and address of individual	<i>,</i> ,,,,,		draiser have	(IV) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid to
or entity (fundraiser)	(ii) Activity		r control of outlons?	from activity	fundraiser listed in	(or retained by) organization
		1.5			col (i)	
		Yes	No	1		
¹ Gabriale Appel TEC Pavillon			1			
Germany	Donor Liaison		•	86,439	46,212	40,227
² Nurit Braun		į	1			
Switzerland	Donor Liaison		-	0	56,826	(56,826)
3						
4						
5						
6						
					}	
7					-	· .
8						
9					· · · ·	
10				1		
		·	L		*	
Total			•	86,439	103,038	(16 500)
3 List all states in which the or	ganization is regis	tered or lic	ensed to s	olicit contributions	or has been notified	(16,599)
registration or licensing.	yuu		0000 10 0		or rido boon riotino	a it is exempt from
NONE						
NONE					••••••	
					·	
•						

Pa	irt II	Fundraising Events. Con than \$15,000 of fundraisingross receipts greater tha	ng event contributions	ion answered "Yes" on and gross income on	Form 990, Part IV, line Form 990-EZ, lines 1 ai	18, or reported more and 6b. List events with
	-		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
ø.			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts				
ш	2	Less Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				***
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses .				
	10 11	Direct expense summary. Ad Net income summary. Subtra			_	
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9	e organization answe			eported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
- Re	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs		·		
_	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes%	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in o	column (d)		
_	8	Net gaming income summar	y. Subtract line 7 from	line 1, column (d)	<u> ▶ </u>	
g	a Is		onduct gaming activitie	es in each of these states		. Yes No
10		ere any of the organization's g "Yes," explain:	amıng licenses revoke	d, suspended, or termina		. 🗌 Yes 🗌 No
					Sale dula	C (Form 000 or 000 E7) 0046

Schedu	le G (Form 990 or 990-EZ) 2016
11 12	Does the organization conduct gaming activities with nonmembers?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
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?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
С	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 a	Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	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 provide any additional information. See instructions
Part I:	
The ag	greements specifies that in addition to the monthly fee, all direct expenses are reimbursed.
In add	lition to the compensation, direct travel and office costs of \$ 3,267 were reimbursed to Gabriele Appel.
In add	lition to the compensation, direct travel and office costs of \$ 5,879 were reimbursed to Nurit Braun.

Schedule G (Form 990 or 990-EZ) 2016

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization **Compensation Information**

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

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

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

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

The Jerusalem Foundation 31 1529945 Part | Questions Regarding Compensation No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line . 2 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. ✓ Written employment contract ☐ Compensation committee Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? 4a **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . 4b Participate in, or receive payment from, an equity-based compensation arrangement? . . . 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? . . 5a Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Were any amounts reported on Form 990. Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2016

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

(i) Base compensation 150,952 126,719 46,479 73,149	(ii) Bonus & incentive compensation 0 0 0 0	(iii) Other reportable compensation 12,385 20,515 20,515 13,175	other deferred compensation 7,615 229,933 229,533 260,521	benefits 0	(B)(i)-(D) 170,952 377,167 245,669 346,845	in column (B) reported as deferred on prior Form 990
(i) (ii) (0 0 0	12,385 20,515 6,575 13,175	7,615 229,933 192,615 260,521	0 0 0		0 0
10 10 10 10 10 10 10 10	0 0	20,515 6,575 13,175	229,933	0 0		0 0
Daniel Minran - Former CEO (i) Hedva Foguel - Former Legal (i) Advisor (i) David Kindler - Former CFO (i) (ii) (ii) (iii) (iiii)	0 0	20,515 6,575 13,175	229,933	0 0		0
Daniel Mimran - Former CEO (i) Hedva Foguel - Former Legal (i) Advisor (i) David Kindler - Former CFO (i) (ii) (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii)	0 0	13,175	192,615	0		0
Hedva Foguel - Former Legal (i) Advisor (i) David Kindler - Former CFO (i) (ii) (ii) (iii)	0 0	13,175	260,521	0		0
Advisor (1) David Kindler - Former CFO (1) (1) (1) (1) (1) (1) (1) (1)	0	13,175	260,521	0		0
(i) (ii) (ii) (ii) (ii) (ii) (ii) (ii)						
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8				_		
(ii)						
(0)						
15						
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(ii)						

(For
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Part line 4a:
Daniel Mimran - received a change-of-control severence payment in the amount of \$ 223,945.
Hedva Foguel - received a change-of-control severence payment in the amount of \$ 190,464.
David Kindler - received a change-of-control severence payment in the amount of \$ 256,831.

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 990-EZ 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

2016

Open to Public Inspection

Name of the organization	Employer identification number
The Jerusalem Foundation	31 1529945
Form 990:	
Part I line 5 & Part V line 2a :	
The Jerusalem Foundation employs 56 individuals in Israel .	
Part III line 4d:	
Part III line 4d:	
- A total of \$ 14,605,328 was used for activities and support of programs in the areas of community so	ervices, art &culture, and coexistence.
- A total of \$ 4,835,265 was used for construction & renovation of projects.	
Part IV line 12:	

The Financial statements are prepared in accordance with Israeli GAAP	
Dart V line Co.	
Part V line 6a:	
Contributions from US Donors are received and receipted by the Jerusalem Foundation Inc. for project	cts of the Jerusalem Foundation
in Israel. Contributions to the Jerusalem Foundation Inc. are tax deductible in accordance with section	n 170.
Part VI line 2:	
- Ruth Chesin & Meir Chet are related	
Post William C. To Th.	
Part VI line 6, 7a,7b:	
The members elect the governing body, appoint the Executive Committee Board members (see Part V	(II), approve signatory rights, elect
external & internal auditor and audit committee, approve audited financial statements and authorize of	hanges in bylaws
Part VI line 11a&b:	
The 990 is prepared by the Chief Accountant and reviewed by the Organization's CFO.	
Part VI line 15:	
Fat Ville 19.	•••••••••••••••••••••••••••••••••••••••
An Executive Personnel Committee determines the compensation of key employees, in line with com	pensation of comparative functions
and qualifications in other entities.	
Part VI line 19:	
Upon request: The Audited Financial Statements and other statutory documentation and information	is filed with the Government Registrar
of Associations in Israel and is available to the general public.	
or Associations in Israel and is available to the general public.	
Part VII :	
The foundation does not compensate directors or trustees	

Cat No 51056K

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

Schedule O (Form 990 or 990-EZ) (2016)

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

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

OMB No 1545-0047 2016

Open to Public Inspection

Employer identification number 31 1529945

(f)
Direct controlling
entity The Jerusalem Fo Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (c)
Legal domicile (state
or foreign country) ISRAEL (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity (1) JIC LLC (EIN) 461684033 The Jerusalem Foundation (2) Part I (2) (2) Part II

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(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	12(b)(13) siled y?
						Yes	No
(1)							
(2)							
(6)	!						
(4)							
(5)							
(9)							
ω)							
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Ġ	Cat No	Cat No 50135Y		Schedule R (Form 990) 2016	(Form 99() 2016

	Prmary activity	Legal domicile (state or foreign country)	Direct controlling entity		Predominant Sha income (related, unrelated, excluded from tax under sections 512-514)	Share of total S	Share of end-of- year assets	f- Disproportonate allocations?	onate Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		General or managing partner?	Percentage ownership
								Yes	S.	<u></u> ⊁	Yes No	
(1)		-										
(2)												
(6)												
(4)											-	
(5)												
(9)												
(7) Hondification of Bolatch Organizations Taylor of the granization of Bolat W	Potential Contraction	- Clack			Terror	1 2	i toriu		, "O'A" TOXO	1 2		2
line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	d one or more re	lated organiza	tions treated	as a cor	poration or t	rust during	the tax y	ear.	20 20 20 20 20 20 20 20 20 20 20 20 20 2	5	,	
(a) Name, address, and EiN of related organization	ganization	(b) Primary activity	(c) Legal domicile (state or foreign country)	micile yn country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	ntity Sha	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage s ownership	tage Sec	(I) Section 512(b)(13) controlled entity?
											×	Yes No
(1)												
(2)												
(6)										ļ	-	
(6)										<u> </u>		
(9)												
(9)												\vdash
6										L	-	-

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016 Method of determining amount involved If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Yes 7 1p ā 9 ပ္ <u>1</u> 1 ¥ ξ 루 9 ₫ Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Amount involved (b)
Transaction
type (a-s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s)

Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Reimbursement paid to related organization(s) for expenses . . . Reimbursement paid by related organization(s) for expenses . . . Loans or loan guarantees to or for related organization(s) . . . Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) Gift, grant, or capital contribution to related organization(s) Other transfer of cash or property to related organization(s) Loans or loan guarantees by related organization(s) . . . Name of related organization Purchase of assets from related organization(s) Exchange of assets with related organization(s) Sale of assets to related organization(s) . Dividends from related organization(s) Part V Ε ۵ 5 N € 9 Ξ 3 ල 9

Schedule R (Form 990) 2016

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	rimialy activity	(state or foreign	income (related,	Are all partners section	Share of total income	Share of end-of-year	Disproportionate allocations?	amount in box 20	General or managing	Percentage ownership
			from tax under	organizations?				1		
				Yes No			Yes No		Yes No	
(1)										
(2)										
(6)										
(4)										
(9)										
(9)										
(Δ)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
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Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See Instructions.
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