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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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

Open to Public

De; Inte	partment of email Reven	the Treasury le Service			rm 990 and its ins		-		m990.		Inspection
Ā		2016 calendar yea			February 1		and endir		anuary	31	, 20 17
В				entral Fund o							r identification number
ň	Address		susiness as	entrar i unu c	1131801				_		13-2992985
H	Name cf			O. box if mail is	not delivered to stre	et address)	Room/su	iite	ΕT	elephon	e number
ក	initial ret	- 9°	•	ue of the Ame				3rd fl			212-519-0247
ŭ					and ZIP or foreign p	ostat code	<u></u>	<u></u>			
ñ	Amende		rk NY 10018		•				G	iross red	selpts \$
\Box			nd address of p					H(a) Is 8	his a group i	eturn for s	ubordinates? 🗌 Yes 🗹 No
	, ibbio	· •		oel St , Efrat i	craei						included? Yes No
1	Tax-exe		1(c)(3)	501(c) () ◀ (Insert no.)	4947(a)(1) or	527				list. (see Instructions)
<u>, </u>	Website				7 - 10000 - 1007 -			H(c) G	iroup exe	mption r	number >
K		rganization: V Corpor	ration Trust	Association	☐ Other ►	LYe	ar of forma	tion: 1	979	A State	of legal domicile: NY
_	art I	Summary		<u></u>							
	1	Briefly describe t	he organizati	on's mission	or most signific	ant activities:	promo	ting char	ritable a	ctivitle	s in Israel
ø	1 .	,					4				
200											4
Activities & Governance	2	Check this box ▶	· if the ora	anization dis	continued its op	erations or di	sposed	of more	than 25	% of i	ts net assets.
ò	3	Number of voting	_							3	(
9	4	Number of indep	•	-	• • •	•				4	
99	5	Total number of i								5	
\$ \$	8	Total number of v		•	•	•	-			6	
Activities & Gov	7a	Total unrelated b	•		• •					7a	(
	ь	Net unrelated bus			•	•				7b	
_	1				-			Pri	or Year		Current Year
4	8	Contributions and	d grants (Par	t VIII. line 1h)					22.99	2,780	20,123,37
Revenue	9	Program service					1			0	
š	10	nvestment incom								9,326	11,31
æ	11	Other revenue (P								6,012	155,03
	12	Total revenue—ad								8,118	20,289,72
_	13	Grants and simila								3,342	18,458,25
	14	Benefits paid to d	-	•						0	
tn	45	Salaries, other cor		•		•				0	
Expenses	16a	Professional fund								0	
ã	b	Total fundraising									
ũ	17	Other expenses (1	6,248	17,96
	18	Total expenses.					5)			9,590	18,476,22
	19	Revenue less exp					".]]			1,472)	1,813,49
ь	8						301	Beginning			End of Year
뜋	20	Total assets (Parl	t X. line 16)		.		၂၀		7.66	0,773	9,474,27
Net Ass	21	Total liabilities (Pa			Tal Jun :	2 1 2017				,,,,,	
2	22	Net assets or fun			1 1		RS-O		7.66	0,773	9,474,27
F	art II	Signature Blo			OCD	CNI IIT					
U	nder pena	ies of perjury. I declar	e that I have exp	infined this retur	m, including accomp	anying schedule	s and state	sments, an	d to the b	est of n	y knowledge and belief, it i
tr	ue, correc	and complete. Declar	ration of prepare	r than offi	cer) is based on all i	nformation of whi	ich prepare	er has any l	knowledg	e.	
		The state of the s	N IN	u-							
Si	gn	Signature of of	ficer						Date		
H	ere	0:	TAY 1	MAR CUS	VP				6	//3	//7
		Type or print no							-	7	·
D	aid	Print/Type prepare	a's name	Pro	parer's signature		0	ate	T	Check [T if PTIN
	repare			_			{			self-emp	
	se Oni	1							Firm's I	EIN ►	
_		Firm's address ▶							Phone		
M	ay the IF	S discuss this ret	um with the	preparer sho	wn above? (see	instructions)					Yes No
Fo	r Paperv	ork Reduction Ac	t Notice, see 1	he separate i	nstructions.		Cat.	No. 11282	Y		Form 990 (201

Pa	ae	2

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
<u>'1</u>	Briefly describe the organization's mission:
	promoting charitable activities in Israel
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$6,139,136 including grants of \$6,139,136) (Revenue \$)
	Social services , Humaitarian aid , aid to the poor ;
	As in the past this is the core area of donations the Central fund is involved with . We received the Jerusalem award in the 1990's
	for our work in humanitarian aid. We aid over 250 charities in israel each year in many areas but this area is always largest
	helping those people who are in need. It can be monetary need or physical needs or emotional needs
	This Category includes aid to food kitchens, children at risk, aid to terror victims, and their families, aid to refugees. & new
	ımmıgrants ,special ed , after school programs etc

4b	(Code:) (Expenses \$ 5,710,745 including grants of \$ 5,710,745) (Revenue \$)
710	(Code:) (Expenses \$5,710,745 including grants of \$5,710,745) (Revenue \$)
	support of educational programs and institutions. There is a great overlap of humaitarian services, as many educational programs
	service the humanitarian aspects of education
	this category also including schools dedicated to the care and education of special needs individuals

	· · · · · · · · · · · · · · · · · · ·
4c	(Code:) (Expenses \$ 3,872,010 including grants of \$ 3,872,010) (Revenue \$)
	community projects; grants to assist in the construction & maintenance of community facilities and projects invoving public
	awareness
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 2,736,367 including grants of \$ 2,736,367) (Revenue \$)
4e	Total program service expenses ► 18,458,758

art.	Checklist of Required Schedules		Yes	No
'1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	V	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	V	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		·
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		·
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		/
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		•
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		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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		~
	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		V_
	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		~
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
	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		~
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		v
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		v
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		<u>v</u>
b		14b	v	
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	v	
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	~	
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		~
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	

Part I	V Checklist of Required Schedules (continued)			
<u>.</u>			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		~
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		~
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
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		V
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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		~
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	İ		
	disqualified persons? If "Yes," complete Schedule L, Part II	26		_
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			,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27	<u></u>	, ,
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	<u>Žii</u>		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	l .		
	Schedule L, Part IV	28b		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
32	Part I	31		~
UZ	complete Schedule N, Part II	32	ļ	,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part 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		V
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		~
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	~	

art	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
•		Females	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4-34		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Lib contacts and the contacts are reported as a contact and applicable and the contact	4		jes sa
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	10		118.11
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	20000	June 194
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			Tital)
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		V
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1		1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	aansaki	Sales A.S. A
þ	If "Yes," enter the name of the foreign country: ▶ Israel			
	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)LEELH	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		100
7	Organizations that may receive deductible contributions under section 170(c).		M	Biji
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	160		
h	and services provided to the payor?	7a		-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
·	required to file Form 8282?	7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year	J.	4.3.23	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	TO MESTINGE	/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
9	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	THU AND DOOR	
9	Sponsoring organizations maintaining donor advised funds.	722		
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		1
10	Section 501(c)(7) organizations. Enter:	30	35 TH	GUN
а	Initiation fees and capital contributions included on Part VIII, line 12	K#		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	7		K.
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	Sir Cont		
	against amounts due or received from them.)	1500		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	40,800.00	pa ej jimba
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		种思维	1772
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	SECTION AND ADDRESS OF THE PARTY.	2 601758
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			K.
	the organization is licensed to issue qualified health plans		Mag	
С	Enter the amount of reserves on hand			
14a		14a	***************************************	V
ь	If "Vos." has it filed a Form 720 to expert those payments? If "No." provide an explanation in Schoolide O	14h	T -	1

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Part				
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			_
Secti	Check if Schedule O contains a response or note to any line in this Part VI		• •	<u>_ [८]</u>
Gecu	on A. Governing Body and Management	— Т	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6	2.0		
_	If there are material differences in voting rights among members of the governing body, or	1 : 1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
р	Enter the number of voting members included in line 1a, above, who are independent . 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	7	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		v
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		V_
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?. Did the organization have members or stockholders?	5		7
7a	Did the organization have members or stockholders?	-		-
	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
ь 9	Each committee with authority to act on behalf of the governing body?	8b		<u> </u>
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	J	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever		ode)	<u> </u>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	mannana.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		~
Ь	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," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14	_	1
15	Did the process for determining compensation of the following persons include a review and approval by		Pir u	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		~
ь	Other officers or key employees of the organization	15b	am#amskdb.	3 5.38 15
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
104	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	TOA	Santa S	PHC-2
	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		(08884082
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► New York			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	s only)
	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in financial statements available to the public during the tax year.			y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	ecords:	:▶	
	lay Marcus - 12 haggel St. Efrat Jerael phone 212 E10 0247			

Form	990	(201	6)
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee	s, and
	Independent Contractors	

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 employees."
- 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 no	r any related	d orga	anız			ompe	nsa	ted any curren	t officer, director	, or trustee.
		ļ		(C	-					
(A)	(B)	(do p		Posi eck		e than o	ne l	(D)	(E)	(F)
Name and Title	Average hours per week (list any	box, t	unles er and	s pei	rson	is both or/trust	n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Arthur Marcus president	11									
(2) Jay Marcus	40									
Vice President				Ш		<u> </u>				
(3) Jeff Most treasurer										
(4) Dr Linda Kalısh Marcus	8							- 		
(5) Mitchell Eichen	0									
(6) Michael Fischberger	0									
(7)					<u> </u>					
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)	1		T	Π	\vdash	<u> </u>	T			

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (c	ontinue	d)
•	(A) Name and title	(B) Average hours per week (list any	box,	unles	Pos leck is pe	rson	than o is both or/trust	an ee)	(D) Reportable compensation from	(E) Reportable compensation related		(F) Estimated amount of other
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		compensation from the organization and related organizations
(15)				-		_	9	-				
(16)						-		_			_	
(17)			-									
(18)				-	-	-					_	
(19)				-	_	-		-				
(20)				_	-	-		-				
(21)			-			-		-				
(22)				-	-	_		\vdash			_	
(23)				-	-	-	-	-			-	··-
(24)			-			-		-		 	-	
(25)			1	-		-		-	-			
1b	Sub-total	<u> </u>	1				<u></u>				0	
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	•					• •	>			0	0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited				ted	abov	e) w				
3	Did the organization list any former or employee on line 1a? If "Yes," complete	fficer, direc						emį		nest compe	nsated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re	porta	ble	con	npe	nsatio					
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc		
Section	on B. Independent Contractors	111 163, 6	Jone		00,		uic o	-	such person	· · · · · ·	 _	[3]
1	Complete this table for your five highest compensation from the organization. Re year.											
	(A) Name and business add	dress							(B) Description of	services		(C) Compensation
								-				
2	Total number of independent contract received more than \$100,000 of compens							o t	hose listed at	oove) who		

Part	VIII	Statement of Reve							
		Check if Schedule O	contains a	a res	ponse or note to			<u> </u>	<u> </u>
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	[1b					
	С	Fundraising events .	[1c			7.4		
Gift	d	Related organizations	[1d		illande de la companya de la company			nautolina sent sanat men
ıs, (е	Government grants (con		1e					
tion er S	f	All other contributions, gi				24 Sept. 18			
ibu		and similar amounts not inc		1f	20,123,375				
Contributions, and Other Sim	g	Noncash contributions include			110,078 76		44.54		
	h	Total. Add lines 1a-1	<u>f</u>	· ·	· · · · •	20,123,375			
nue					Business Code				
eve	2a				ļ				
ë E	b						<u> </u>		
Ż	C								
Se .	d			- 					
ıran	e l f	All other program sen					<u> </u>		
Program Service Revenue	g	Total. Add lines 2a-2				 			
	3	Investment income					In States - Cr. rates, Juditiate offer Landorthus	Machine in destate wifeline broseniers	Shalleton Christian Trade La Sonnad Handle Left See
		and other similar amo			>	11,317	11,317	1	
	4	Income from investment	t of tax-exer	not be	ond proceeds ▶	1.7,5.7			
	5	5 40							
		_	(ı) Real		(ii) Personal			To the form of the contract of	September 1980 and a september 1981 and a september
	6a	Gross rents					44		
	b	Less: rental expenses							
	C	Rental income or (loss)							
,	d	Net rental income or (<u> </u>	<u> ▶</u>				
!	7a	Gross amount from sales of	(i) Securiti	es	(ii) Other				
		assets other than inventory			ļ				
	b	Less: cost or other basis							
1	ł	and sales expenses .			ļ	F. 3. 4. F.			
	C	Gain or (loss)			l				and designation of
	d	Net gain or (loss) .		• •	· · · · >		i San over radioent		<u> </u>
ē	8a	Gross income from fu	ındraising		ĺ				
ē		events (not including \$	g		l		Touris Seamon Did not have		Paristania de Proposito
è		of contributions reporte	ed on line 1	c).					
e_	}				1				
Other Revel	ь	Less: direct expenses	3	. b				10.1	
•	С	Net income or (loss) f	rom fundra	ising	events . >				
	9a		amıng actıvı	ties.				. T. T. J.	
	l	See Part IV, line 19 .		· a					
	b	Less: direct expenses							ACCEPTAGE SERVICES
	С	Net income or (loss) f	_	_	ivities ▶				
	10a			less				100	
		returns and allowance		· a	<u> </u>				30
	b	Less: cost of goods s		. b					Historia de la companya de la compa
	c	Net income or (loss) f		אחו זכ		A STATE BOLL (BESSELE) OF STATE OF STAT	i og ge	Children Primaring and Artificial	i rogger hoggestommere omserven sæ
	4.4 =	Miscellaneous F			Business Code				
	11a	gains from currency co	onversions		ļ	155,033	<u> </u>		
	b					 	1	 	
	d	All other revenue				 	\	 	
	e	Total. Add lines 11a-		•	<u> </u>		· Functional data	200120	
	12	Total revenue. See it		• •		20 200 725	C-MARCON DOCUMENTAL SE	COLUMN CONTRACTOR CONT	: romande de la

Form 99	_ 			- <u></u>	Page 10
	Statement of Functional Expenses in 501(c)(3) and 501(c)(4) organizations must con	poloto all columns A	Il other organization	es must complete co	Jump (A)
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	18,458,258	18,458,258		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
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				
9 10 11	Other employee benefits				
a b c	Fees for services (non-employees): Management	9990		9990	
d e	Lobbying			The Mark Table States in the	
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column	1853	William to a Company of T. Comman & Shop and	1853	
12 13 14 15	(A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion Office expenses Information technology Royalties Occupancy	250		250	,
17 18	Travel	5876		5876	
19 20 21 22 23	Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance				
24 a	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.)				
b c					
d e 25	All other expenses Total functional expenses. Add lines 1 through 24e	18,476,227	18,458,258	17,969	
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 following SOP 98-2 (ASC 958-720)	15(1)5(22)	15/155/250	.,,,,,,	

	artx	Dalance Sneet				
<u>.</u>		Check if Schedule O contains a response or	note to any line in this Pa	rt X		<u> </u>
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		2,737,694	1	2,336,207
	2	Savings and temporary cash investments		4,553,273	2	6,647,984
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for trustees, key employees, and highest con Complete Part II of Schedule L		and the property of the second	5	
B	6	Loans and other receivables from other disqualified personal 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volunt organizations (see instructions). Complete Part II of Scheduling	d contributing employers and ary employees' beneficiary	194	6	4
Assets	7	Notes and loans receivable, net		369,806	7	490080
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or	10a			
	ь	·	10b		10c	120 AND 18 18 18 18 18 18 18 18 18 18 18 18 18
	11	· · · · · · · · · · · · · · · · · · ·			11	
	12	Investments—other securities. See Part IV, line 1			12	
	13	Investments – program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa		7,660,773	16	9,474,271
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete P	art IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and fo trustees, key employees, highest compens disqualified persons. Complete Part II of Schedul	sated employees, and		22	
Ë	23	Secured mortgages and notes payable to unrelat			23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines	payables to related third 17-24). Complete Part X			
	00	of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25	ahaalahama A 🖂 🖘	0	26	
ces		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	1 34.			
ā	27	Unrestricted net assets			27	
Ba	28	Temporarily restricted net assets			28	
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.		and the second s	29	
ş	30	Capital stock or trust principal, or current funds		The state of the s	30	
set	31	Paid-in or capital surplus, or land, building, or eq			31	
As	32	Retained earnings, endowment, accumulated inc			32	
et	33	Total net assets or fund balances		7,660,773	+	9,474,27
2	34	Total liabilities and net assets/fund balances .		7,000,773	34	7,777,27

Page	1	2
, 490	•	•

Ι

:

Form 9	90 (2016)			Page 12
Par	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	· · · · ·	<u> </u>	<u>. </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	20	,289,725
2	Total expenses (must equal Part IX, column (A), line 25)	2	18	3,476,227
3	Revenue less expenses. Subtract line 2 from line 1	3	1	,813,498
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,660,773
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1		
	33, column (B))	10		,474,271
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		_;
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," expected the control of	olain in		es No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:		2a	
b	Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	 ed on a	2b •	
c	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, ex	ntant?	2c	
3a	Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		
	the Single Audit Act and OMB Circular A-133?		3a	V
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

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

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Central Fund of Israel Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

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.")	16,126,877	19,673,626	25,657,201	22,992,907	20,123,375	104,573,986
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	16,126,877	19,673,626	25,657,201	22,992,907	20,123,375	104,573,986
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						23,339,186
6	Public support. Subtract line 5 from line 4		250000				81,234,800
Secti	on B. Total Support	79-10-5-17-18-60000	Bir t m with the	100 DOG 100 1 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 cm 7 cm 8 cm 2 cm 2	300 200901 2 22 2	01,201,002
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	16,126,877			22,992,907	20,123,375	104,573,986
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	7,333	7,408	8365	9,325	11,317	43,748
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11		12.5 EM 2300				6-5-4-5-6-5-6-5-6-5-6-5-6-5-6-5-6-5-6-5-	104,617,734
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the	_			•		
	organization, check this box and stop he			<u></u>	<u></u>	· · · · ·	▶ [
	on C. Computation of Public Suppo					T	
14	Public support percentage for 2016 (line	• • • • • • • • • • • • • • • • • • • •	-			14	78 %
15 160	Public support percentage from 2015 Sc 331/3% support test—2016. If the organ					21.00/ 07 70.00	82 %
iua	box and stop here. The organization qua						
b	331/3% support test—2015. If the organ			_			
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization metal the Part VI how the organization meets the organization	2016. If the org leets the "facts "facts-and-circ	anization did r -and-circumst cumstances" te	not check a bo ances" test, cl est. The organi	ox on line 13, 1 heck this box i ization qualifie	6a, or 16b, an and stop here s as a publicly	d line 14 is . Explain in supported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiz Explain in Part VI how the organization supported organization	2015. If the org ation meets th meets the "fac	anization did r ne "facts-and- cts-and-circum	not check a bo circumstances stances" test.	ox on line 13, " test, check The organizat	16a, 16b, or 17 this box and ion qualifies as	7a, and line stop here. s a publicly
18	Private foundation. If the organization d	lid not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

	in the organization rails to quality	under me te	sts listed beit	ow, piease co	Jimpiete Fait	II.)	
	on A. Public Support				1		
	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				1		
2	received. (Do not include any "unusual grants.")		<u> </u>				
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	Ì		}		1	
	to or expended on its behalf	i		j			
5	The value of services or facilities						
	furnished by a governmental unit to the			1			
	organization without charge	ļ		ļ		[
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	ĺ			1	1	
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	ļ- 			 	-	
8	Public support. (Subtract line 7c from	Jack Constitution		37644		taril telihili ya va	
-	line 6.)			6-34-31			
Section	on B. Total Support	77,900388880,545,43540	12: 28: 8: 30: 170.	Restaura de la Constaura de la	16.88.86.42.6	1 38 (Sections About the Control	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	, , , , , , , , , , , , , , , , , , , ,		1 (2)	1	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			1		1	
	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			1			
11	Net income from unrelated business			<u> </u>	<u> </u>		
	activities not included in line 10b, whether			1			
	or not the business is regularly carried on	}		l		ļ į	
12	Other income. Do not include gain or						
	loss from the sale of capital assets			}			
	(Explain in Part VI.)			į	1		
13	Total support. (Add lines 9, 10c, 11,			1		1	
	and 12.)	1		}			
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourtl	n, or fifth tax v	ear as a section	n 501(c)(3)
	organization, check this box and stop he	re					▶ □
Secti	on C. Computation of Public Support	rt Percentaç	ge	7.10.20.7			
15	Public support percentage for 2016 (line	8, column (f) c	livided by line	3, column (f))	·	15	%
16	Public support percentage from 2015 Sc	hedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In	come Perce	entage				
17	Investment income percentage for 2016	(line 10c, colu	mn (f) dıvided b	y line 13, colu	ımn (f))	17	%
18	Investment income percentage from 201						%
19a	331/3% support tests-2016. If the organ						
	17 is not more than 331/3%, check this box	and stop here	. The organizati	ion qualifies as	a publicly supp	orted organizati	on . ▶ 🗌
b	331/3% support tests - 2015. If the organiz						
	line 18 is not more than 331/3%, check this	box and stop	here. The organ	ization qualifie	s as a publicly s	supported organ	zation 🕨 📋
20	Private foundation. If the organization d	id not check a	box on line 14	, 19a, or 19b,	check this box	and see instruc	ctions > 🗀

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.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- B 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)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined 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.
- 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.
- 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.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedul	e A (Form 990 or 990-EZ) 2016	Page 5
Part I	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?	11a
	A family member of a person described in (a) above?	11c
	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.	
Section	on b. Type I Supporting Organizations	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	
	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	
_	organization operate for the benefit of any supported organization other than the supported organization of the supported organization organizati	
	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	
		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).	
04		1
Section	on D. All Type III Supporting Organizations	Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1 es 140
•	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
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	94.5(M)
	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 supported organizations played in this regard.	
<u> </u>		3
	on E. Type III Functionally Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instructions).
а	The organization satisfied the Activities Test. Complete line 2 below.	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see instructions)
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	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	
	how the organization was responsive to those supported organizations, and how the organization determined	
	that these activities constituted substantially all of its activities.	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.	O.
2	•	2b
3	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	
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja ja
D	of its supported organizations? If "Ves." describe in Part VI the role played by the organization in this regard	3h

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
.1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organ	ızat	ions must complete Section	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
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	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	133		
factors (explain in detail in Part VI):	700		Andrews to be the
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	ly in	tegrated Type III supporting	g organization (see
instructions)			

Section B - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (pror IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total amount distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2016 from Section C, line 6 10 Line 8 amount divided by Line 9 amount Section E - Distribution Adlocations (see instructions) 1 Distributable amount for 2016 from Section C, line 6 1 Underdistributions, fam, for years prior to 2016 2 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover if any to 2016 4 From 2013 5 From 2014 6 From 2015 7 Total of lines 3a through e 9 Applied to underdistributions of prior years 1 Applied to Underdistributions of prior years 1 Applied to Underdistributions of years prior to 2016 from Section C, line 6 1 Carryover from 2011 not applied (see instructions) 1 Remainder Subtract lines 3g, 3h, and 3l from 3f. 4 From 2015 5 Remaining underdistributions of prior years 5 Applied to underdistributions of years prior to 2016, if any, Subtract lines 3g and 4a from line 7. 8 Applied to underdistributions for 2016 from Section C, line 6 8 Remaining underdistributions for 2016 from Section C, line 6 9 Applied to underdistributions for 2016 from Section C, line 6 9 Applied to underdistributions for 2016 from Section C, line 6 9 Applied to underdistributions for 2016 from Section C, line 6 9 Applied to underdistributions for years prior to 2016, if any, Subtract lines 3n and 4c. 8 Remaining underdistributions for 2016 f	Part) Supporting Organi	zations (continued)	
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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: a Need to the seed of the s			Execus Bioti is allotte	Pre-2016	Amount for 2016
2 (reasonable cause required—explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2016: a Number of the property of the prope	1	Distributable amount for 2016 from Section C, line 6			
instructions. 3 Excess distributions carryover, if any, to 2016: a		Underdistributions, if any, for years prior to 2016			
3 Excess distributions carryover, if any, to 2016: a	2	(reasonable cause required-explain in Part VI). See			
a b c From 2013		instructions.			
b c From 2013	_3_				
c From 2013	a		nd Street - Street Sauth		
d From 2014	b_				
e From 2015	С	From 2013	and the second s		The section is
f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount i Carryover from 2011 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2016 from Section D, line 7: a Applied to underdistributions of prior years b 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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015	d	From 2014	FAMILIANIA S		new white and
g Applied to underdistributions of prior years h Applied to 2016 distributable amount i Carryover from 2011 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2016 from Section D, line 7: a Applied to underdistributions of prior years b 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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015	е	From 2015			
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i Carryover from 2011 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2016 from Section D, line 7: a Applied to underdistributions of prior years b 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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015	g	Applied to underdistributions of prior years			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2016 from Section D, line 7: a Applied to underdistributions of prior years b 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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015	<u>h</u>	Applied to 2016 distributable amount	945年3月7日第18日		
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b 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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013		Section D, line 7:			
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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013	a	Applied to underdistributions of prior years	PLANTING THE PARTY		
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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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013	<u>c</u> _	Remainder. Subtract lines 4a and 4b from 4.			aling metals. 5.0
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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013	5				
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 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013					
and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2017. Add lines 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015		greater than zero, explain in Part VI. See instructions.			Park Carlot Maria Carlot Carlo
Part VI. See instructions. 7 Excess distributions carryover to 2017. Add lines 3; and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015	6				
7 Excess distributions carryover to 2017. Add lines 3j and 4c. 8 Breakdown of line 7: a b Excess from 2013					
and 4c. 8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015					
8 Breakdown of line 7: a b Excess from 2013 c Excess from 2014 d Excess from 2015	7				
a b Excess from 2013 c Excess from 2014 d Excess from 2015				Galeria Gregoria (Galeria)	
b Excess from 2013	8	Breakdown of line 7:	STEMPLE HAVE		
c Excess from 2014 d Excess from 2015	<u>a</u>				
d Excess from 2015	b				
the data to the state of the st	c		A HIGH TO THE ST		
e Excess from 2016	d				
	е	Excess from 2016			

Schedule A (Fo	orm 990 or 990-EZ) 2016 Page
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, 2 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 lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

- 16

OMB No 1545-0047 2016

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.

Name of	the organization					Employer ide	entification number
	Fund of Israel					13	-2992985
Part	General Information Form 990, Part IV, line		es Outside	the United States. Comp	lete if the organ	ization ansv	wered "Yes" on
	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for the	e grants or as				✓Yes □No
	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for morato	oring the use o	of its grants	s and other
3	Activities per Region. (The fo	ollowing Part	l, line 3 table o	can be duplicated if addition	al space is need	ded.)	_
_	(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 lists a program se describe specifi service(s) in the	ervice, ic type of	(f) Total expenditures for and investments in the region
(1) m	niddle east	0	0	grants			18,458,258
(2) m	niddle east	0	0	free loans			264,560
(3)							
(4)							
(5)							
(6)							
(7)							··-··
(8)							
(9)					= 10-		··-·
(10)		<u> </u>					
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
3a	Sub-total						18,722,818
	Total from continuation sheets to Part I						

c Totals (add lines 3a and 3b)

18,722,818

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2016

Part II Grants ar

	Part IV,	line 15, tor ar	א recipient wno גי	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated II additional space is freeded.	SO, UUU. Part II car	l De duplicated II at	Julional space is i	leeded.	
-	(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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
Ξ			míddle east	educational prgrms	22,750 check	heck			
(2)			middle east	educational prgrms	35,000 check	:heck			
÷ (6)		J	middle east	humanitarian aid	25,000 check	:heck			
3			middle east	community projects	11,650 check	heck			
(9)			middle east	humanitarian aid	25,000 check	heck			
(9)	4.47		middle east	community projects	35,000 check	:heck			
E			middle east	community projects	6,487 check	heck			
(8)			middle east	security	42,249 check	:heck			
6	(6)		middle east	synagogue cnst	19,900 check	heck			
(10)			middle east	humanitarian aid	7,500 check	:heck			
Ξ		iniddle east	niddle east	aid for the needy	5,000 check	heck			
100 E			míúdle east	security	50,000 check	heck			
(13)	13)		middle east	community projects	20,000 check	heck			
<u>4</u>			middle east	educational prgrms	26,500 check	:heck			
(15)			middle east	synagogue cnst	50,000 check	heck			
(16)	(16)		middle east	educational prgrms	10,675 check	heck			

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

Enter total number of other organizations or entities ෆ

Schedule F (Form 990) 2016

301

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Day IV line 15, for any recipient who received more than \$5,000 Bart II can be directed if additional space is peopled. Schedule F (Form 990) 2015

Part | Grants at

	(i) Method of valuation (book, FMV, appraisal, other)															:	
needed.	(h) Description of non-cash assistance											:					
dditional space Is	(g) Amount of non-cash assistance											1					
more than \$5,000. Part II can be duplicated it additional space is needed	(f) Manner of cash disbursement	check	sheck	heck	heck	theck	heck	heck	heck	heck	heck	знеск	check	heck	heck	heck	check
5,000. Part II car	(e) Amount of cash grant	10,964 check	10,000 check	71,771 check	6,450 check	10,000 check	50,480 check	185,000 check	9,300 check	10,108 check	 	16,800 check	330,782 check	119,730 check	10,000 check	5,000 check	5,860 check
eceived more than \$	(d) Purpose of grant	humanitarian aid	ald for the needy	educational prgrms	educational prgrms	humanitarian aid	educational prgrms	educational prgrms	educational prgrms		and programs	human‱ลกลเต	sur fild priovežnpa	educational prgrms	synagogue cnst	special education	synagogue cnst
Part IV, line 15, tor any recipient who received	(c) Region	middle east	middle east	middle east	middle east	mıddle east	middle east	middle east	middle east		i	mic.ile east	isto reijot an	middle east	middle east	middle east	middle east
line 15, tor ar	(b) IRS code section and EIN (if applicable)	middle east	middle east			Free middle east	U TOTAL TOTA					tsec all time					
Part IV,	1 (a) Name of organization	9	(2)	(3) F 3 (4)	(6)	(6)	(9)	6	(8)	(6)	(10)				(p)	(15)	(16)

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

Enter total number of other organizations or entities ೮

Page 2

Schedule F (Form 990) 2016

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Dart IV line 15, for any recipient who received more than \$5,000. Dart II can be duniticated if additional energies needed.

Part IV		line 15, for any recipient who received		5,000. Part II car	more than \$5,000. Part II can be duplicated if additional space is needed	Iditional space is I	needed.	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	I N	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	<u> </u>	middle east	food kitchen	5,000 check	check			
(2)		middle east	synagogue cnst	7,500 check	check			
(3)		middle east		15,745 check	heck			
(4)		middle east		12,600 check	heck			
(5):		mlddle east	synagogue cnst	138,000 check	heck			
(9)		middle east	youth at risk	10,000 check	heck			
		middle east	synagogue cnst	40,000 check	heck			
(8)		middle east		10,000 check	heck			
		middle east	synagegue cnst	26,109 check	heck			
(10)	on lole ast	•	synagogue crist	13,770 check	heck			
	mente rast	awidle rast	religious pignais	6,950 check	heck	,		
		1. de la set	aft set onlygers	42,625 check	heck	:		
		mıddle east	educational prgrms	6,600 check	heck			
(14) [I	middle east	community projects	51,046 check	heck			
(15)		mıddle east	aid for the needy	6,620 check	heck			:
(16)		middle east	community awareness	500,000 check	heck			!

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

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be dublicated if additional space is needed. Schedule F (Form 990) 2016

Part II Grants at

Compact Comp	Part IV,	(b) IRS code	ne of (b) IRS code (c) Region (d) Fathor and ElM		6) Amount of	more than \$5,000. Part II can be duplicated it additional space is needed.	(g) Amount of	(h) Description	(i) Method of
middle east religious prgrms 8,000 check middle east religious prgrms 40,000 check middle east religious prgrms 88,811 check middle east aid for the needy 5,000 check middle east aid for the needy 5,000 check middle east aid for the needy 22,750 check middle east prgrms 22,415 check middle east religious prgrms 5,288 check middle east religious prgrms 5,288 check middle east religious prgrms 5,288 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check	organisation	(if applicable)	,	gram	casn grant	casn disbursement	noncasn assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
middle east religious prgrms				religious prgrms	8,000	heck			
middle east religious prgrms 88,811 check					40,000	heck			
middle east aid for the needy 10,000 check middle east aid for the needy 5,000 check middle east aid for the needy 5,000 check middle east aid for the needy 5,000 check middle east aid for the needy 22,500 check middle east synagogue cust 8,000 check nuitdle east religious prgrms 5,288 check middle east educational prgrms 5,288 check middle east educational prgrms 5,500 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check			middle east		88,811 c	heck			
middle east aid for the needy 5,000 check middle east aid for the needy 5,000 check middle east aid for the needy 22,500 check middle east aid for the needy 22,500 check middle east synagogue crist 8,000 check middle east religious prgrms 5,288 check middle east religious prgrms 5,288 check middle east religious prgrms 5,288 check middle east religious prgrms 5,280 check middle east religious prgrms 5,280 check middle east religious prgrms 5,280 check			middle east	aid for the needy	10,000	heck			
middle east aid for the needy 5,000 check middle east humanitarian aid 25,750 check middle east aid for the needy 22,500 check middle east calcational programs 20,400 check middle east religious programs 5,288 check middle east educational programs 5,200 check middle east educational programs 5,500 check middle east religious programs 5,500 check middle east religious programs 5,500 check middle east religious programs 5,500 check			mıddle east	aid for the needy	44,388 C	heck			
middle east humanitarian aid 25,750 check middle east aid for the needy 22,500 check middle east synagogite crist 8,000 check middle east religious prgrms 5,288 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check			middle east	aid for the needy	2,000 c	heck			
middle east aid for the needy 22,500 check middle east synagogue crist 8,000 check middle east educational programs 22,415 check middle east religious programs 5,288 check middle east educational programs 5,288 check middle east educational programs 5,200 check middle east religious programs 5,200 check middle east religious programs 5,500 check			mıddle east	humanitarian aıd	25,750 0	heck			
nitifile east synagogue crist 8,000 check nitifile cast educational pryms 22,415 check nitifile east food kichun 29,010 check middle east educational pryms 5,288 check middle east educational pryms 5,500 check middle east religious pryms 5,500 check	(6)		middle east	aid for the needy	22,500 c	heck			
nitible cast educational prigrms 22,415 check nitible cast food krichen 29,010 check middle east religious prgrms 5,288 check middle east educational prgrms 11,000 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check			,	synagogue cust	000'8	heck			
middle east religious prgrms 5,288 check middle east religious prgrms 11,000 check middle east educational prgrms 11,000 check middle east religious prgrms 5,500 check middle east religious prgrms 5,500 check	101			educational prytims	22,415 c	heck			
middle east religious prgrms 5,288 check middle east educational prgrms 11,000 check middle east educational prgrms 99,000 check middle east religious prgrms 5,500 check			nteldie nast	educa: อะเลป pryrms	20,400 c	heck			
middle east religious prgrms 1 middle east educational prgrms 1 middle east educational prgrms 9 middle east religious prgrms 9			રજો મેટ વર્ષ	food kaction	29,010 5	¢	:		
middle east educational prgrms 1 middle east educational prgrms 9 middle east religious prgrms			middle east	religious prgrms	5,288 C	heck			
middle east educational prgrms 9			middle east	educational prgrms	11,000 C	heck			
middle east religious prgrms			middle east	educational prgrms	o 000'66	heck			
			middle east	religious prgrms	5,500 C	heck			

N

Enter total number of other organizations or entitles <u>ن</u>

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (i) Method of valuation (book, FMV, (h) Description of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement (e) Amount of cash grant (d) Purpose of grant (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

	(if applicable)			dispursement	assisiance	appraisal, other)
E	middle east	religious prgrms	22,105 check	check		
(2)	Middle east	outreach prgms	25,000 check	check		
	middle east	educational prgrms	6,200 check	check		
(4)	middle east	educational prgrms	275,000 check	check		
" Stewart in	middle east	educational prgrms	900,000 check	check		
(9)	middle east	outreach prgms	96,800 check	check		
9	middle east	education	24,000 check	check		
(8)	middle east	medical a	12,000 check	check		
(6)	nudle ast	educate		check		
6.	mid" east	İ	2	check		
	(1)	educat-onal pryms	5,000 check	check		
14.01		s, reford spunuiuo	11,550 check	check		
(61)	middle east	community projects	40,854 check	check		
(14)	middle east	medical aid	141,000 check	check		
(61)	middle east	outreach prgms	58,655 check	check		
(16)	middle east	educational prgrms	5,258	5,258 check	,	

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

³ Enter total number of other organizations or entities

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2016

Part | Grants al

	code (c) Region (d) Purpose of cash grant cash grant disbursement assistance (book, FMV, able)	middle east community projects 25,000 check	niddle east	niddle east	iddle east education	nddle east youth at ri	middle east humanitarian aid 10,000 check.	middle east aid for the needy 5,500 check	special ed	humanıtarıan ard	SII	aid for the ne-dy 58,964 check	Specified cather 24,926 check	educational prgrms 24,850 check	communi	middle east security	modical modical
y recipient wno received more to		niddle east	niddle east	niddle east communit	iddle east education	nddle east youth at ri	nddle east	iddle east aid for the				aid for the	;	education	communi	middle east security	middle east medical and
Part IV, line 15, tor an	1 (a) Name of section and EIN (if applicable)				4)				(8)	(6)	(10)			(13) middle east	14)	(5)	16)

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Enter total number of other organizations or entities et

Page 2

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement 15,450 check 82,335 check 236,594 check 15,000 check 14,000 check 50,000 check 45,958 check 10,000 check 6,000 check 17,000 check 6,568 check 5,200 check 23,424 check 75,168 check 126,990 check 15,000 check (e) Amount of cash grant community projects community p oforts community projects community projects community projects community projects educational pryrms educational prgrms educational prgrms (d) Purpose of grant religious prgrms humanitarian aid aid for the needy religious prgrms religious prgrms free loan fund legal aid (c) Region as an interpretation of the second middle east 🐃 middle east middle east middle east middle east middle east middle east middle east middle east middle east michile past middle east middle east middle east (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

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

3 Enter total number of other organizations or entities

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Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV line 15 for any recipient who received more than \$5 000 Part II can be directed if additional snace is needed Part II

in Mothod of																	
needed.	(n) Description of noncash assistance																
recipient who received more than \$5,000. Part II can be duplicated it additional space is needed.	(g) Amount of noncash assistance										,	1	4 1 1 1				
be duplicated if a	(f) Manner of cash disbursement	check	check	check	check	check	check	check	check	5,000 check	check	check	5,000 check	check	check	5,000 check	check
5,000. Part II cal	(e) Amount of cash grant	44,300 check	139,144 check	47,730 check	20,000 check	241,832 check	70,000 check	19,600 check	92,600 check	5,000	282,729 check	100,000 check	2,000	70,000 check	95,000 check	2,000	144,970 check
eceived more than \$	(d) Purpose of grant	community projects	hopital const	youth at risk	educational prgrms	refugee and	humanitarian aıd	vouth at risk	community projects	religious prarms	: 3	synagogue cnst	st v to d kliminimoo	community projects	elderly aid	aid for the needy	womens health
y recipient who r	(c) Region	middle east	middle east	niddle	mıddle east	middle east	middle east	middle east	middle east	inclote east	middle east	nddde east	· · · · · · · · · · · · · · · · · · ·	rniddle east	middle east	middle east	middle east
line 15, for any	(b) IRS code section and EIN (if applicable)		2											ınic			
Part IV,	1 (a) Name of organization	(1)	(2)	(3)		(9)	(9)	, in the second	(8)	6	(10) mitdle east		3	(13)	(14)	(15)	(16)

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

Enter total number of other organizations or entities ധ,

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

Part IV,	line 15, tor ar	y recipient who re	line 15, for any recipient who received more than \$5,000. Part II can be duplicated II additional space is needed.	o,uuu. Part II can	n be duplicated II ac	Julional space is i	leenen.	
1 (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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1).		middle east	aid for the needy	5,000 check	heck			
2).		middle east	community projects	50,000 check	heck			
(8)		mıddle east		35,000 check	heck			
		middle east	holocaust aid	5,120 check	heck			
(5)		middle east	1 1	56,915 check	heck			
(9)		middle east	aid for the needy	5,300 check	heck			
μ.		middle east	educational prgrms	193,860 check	heck			
(8)		mlddle east		58,366 check	check			
(6)		middle east	humanıtarıan aid	15,905 check	check			
(10)		niddle east	immigrant aid	5,000 check	theck			
(11)		riddle sast	aid for the needy	56,204 check	check	the state of the s		
10.1		Total Decast	humande on aid	5,000 check	heck			
13)		middle east	community projects	9,063 check	heck			
14)		middle east	community projects	25,000 check	check			
15)		middle east	aid for the needy	39,590 check	check			
(16)		middle east	educational prgrms	114,000 check	check			

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

^{3.} Enter total number of other organizations or entities

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

Fart IV	1v, III)e 15, 10r a	ny recipient who re	, line 15, 10r any recipient who received more than \$5,000. Part it can be duplicated it additional space is needed.	5,000. Part II car	i pe duplicated li ad	dilional space is i	eeded.	
1 (a) Name of organization	(thapplicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		middle east	aid for the needy	41,960 check	heck			
(2)		middle east	outreach prgms	140,147 check	heck			
(6)	middle east	middle east	community projects	10,000 check	heck			
(4)		middle east	religious prgrms	10,000 check	heck			
(9)		middle east		5,379 check	heck			
(9)	a de la companya de l	middle east	outreach prgms	17,563 check	heck			
$\frac{1}{2}$		middle east	aid for the needy	7,220 check	heck			
(9)		middle east	educational prgrms	12,700 check	heck			
6)		middle east	legal aid	262,006 check	heck			
(10)		michile cast	hymanitarian aid	137,990 check	heck	The state of the s		
(f)		tseo ລໍຖວລາພ ອ	humanitarian aid		:		And the state of t	
149		181. 1950.	terror victim sprid	5,095 check	heck			
(13)		middle east	community projects		heck			
(14)		middle east	educational prgrms	7,500 check	heck			
(6)		middle east	youth at risk	30,000 check	heck			
(16)		middle east	educational prgrms	179,750 check	heck			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0

³ Enter total number of other organizations or entities

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

for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	r of (g) Amount of (h) Description (i) Method of noncash assistance assistance (book, FMV, appraisal, other)																
000. Part II can be dupli	(e) Amount of (f) Manner of cash grant disbursement	5,000 check	5,000 check	5,000 check	29,001)check	76,060 check	110,550 check	38,000 check	8,855 check	13,000 check	13,536 check		10,000 check	528,046 check	11,933 check	40,100 check	-
received more than \$5,	(d) Purpose of grant	educational prgrms	educational prgrms	aid for the needy		security	security	educational prdrms	humanıtarian aid	synagogue cnst	community brolects	humanitarian aid	aid for the Beech	educational prgrms	educational prgrms	educational prgrms	
y recipient who r	(c) Region	middle east	middle east	mıddle east	middle east	middle east	middle east	middle east	middle east	middle east	ì	nuddle east	15k · 450) .	middle east	middle east	middle east	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
, line 15, for an	(b) IRS code section and EIN (if applicable)							t									
Part IV, li	1 (a) Name of organization	(i)	(2)	(6)	(2)	(9)	(9)	(4)	(8)	(6)	(10)	(1.1)	10.	(13)	(44)	(61)	(9)

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 0

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Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement 6,998 check 323,475 check 50,000 check 523,334 check 17,200 check 7,800 check 38,195 check 81,410 check 15,034 check 161,092 check 11,000 check 5,000 check 14,220 check 39,582 check 5,558 check 40,000 check (e) Amount of cash grant community projects community projects community projects community projects s;acloid (linnmmoa community projects educational prgrms educational prgrms educational prgrms (d) Purpose of grant humanitarian aid aid for the needy women med aid synagogue cnst womens health youth at risk youth at risk middle cast middle east middle east (c) Region muddle east middle east (b) IRS code section and EIN (if applicable) (a) Name of organization Part II 9

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

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Enter total number of other organizations or entitles

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV line 15 for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2016

Part II Grants al

Part IV	/, line 15, for a	ny recipient who re	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	5,000. Part II can	be duplicated if ac	ditional space is r	heeded.	
1 (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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1)		middle east	aid for the needy	57,221 check	heck			
		middle east	synagogue cnst	5,000 check	check			
(3)		middle east	educational prgrms	6,500 check	heck			
(4)		middle east	community projects	78,000 check	heck			
100 mm		middle east	youth at risk	25,700 check	check			
(9)		middle east	1 -	102,825 check	heck			
		middle east	educational prgrms	6,000 check	check			
(8)		middle east	medical aid	25,000 check	check			
(6)		middle east		33,000 check	check			
(10)		delle cast	community projects	25,000 check	check			
			educational prgrms	10,500 check	check			
		middle past	humanıtarıan ลเร่	32,141 check	check			
(13)		middle east	humanitarian aid	16,180 check	check			
(14)		middle east	womens health	115,588 check	check			
(15)		middle east	outreach prgms	15,000 check	check			
(16)		middle east	educational prgrms	67,154 check	check			

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

N

Enter total number of other organizations or entitles ω,

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Day IV ling 15, for any recipient who received more than \$5,000, Day II can be directed if additional energies needed. Part II

Part IV,	line 15, tor a	ny recipient who r	tor any recipient who received more than \$5,000. Part II can be duplicated it additional space is needed	5,000. Part II can	n be duplicated it aα	ditional space is	needed.	
1 (a) Name of organization	(t) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		middle east	religious prgrms	5,180 check	heck			
(2)		middle east	educational prgrms	26,825 check	heck			
(6)		middle east	girls at risk	63,737 check	heck			
(4)		middle east	educational prgrms	5,000 check	heck			
(9)	u (* middle east	educational prgrms	127,115 check	heck			
(9)		middle east	outreach prgms	29,793 check	heck			
		middle east	special education	50,000 check	heck			•
(6)	U	middle east	religious prgrms	5,250 check	heck			The second secon
(6)		middle east	aid for the needy	15,000 check	:heck			
(10)		nddle east	humanitarian aid	10,000 check	:heck			
		nyiddle east	pub awareness prgm	69,199 check	heck			
(12)		iddle cast	community projects		:heck			
(13)		iddle east	educational prgrms	16,176 check	heck	•		
(14)	J	middle east	religious prgrms	6,000 check	heck			
(15)		middle east	special education	18,500 check	heck			
(16)		middle east	womens health	6,000 check	heck			

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

³ Enter total number of other organizations or entities

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

Part IV,	_	line 15, tor any recipient who received		5,000. Part II can	more than \$5,000. Part II can be duplicated if additional space is needed.	ditional space is r	leeded.	
1 (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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		middle east	humanitarian aid	160,000 check	heck			
2)		middle east	ald for the needy	10,361 check	heck			
(c)		middle east	educational prgrms	16,745 check	heck			
(4)		middle east	special education	9,276 check	heck			
(5)		middle east		12,988 check	heck			
(9)		middle east	humanitarian aid	25,000 check	heck			
(Δ)		middle east	community projects	28,762 check	heck			
3.79.00		middle east	community projects	50,000 check	heck			
(6)		middle east	outreach prams	25,000 check	heck			
(10)		middle east	security	25,000 check	heck			
		middle east	legal aid society	950,175 check	heck			
10 m		miðtlis east	special education	111,244 check	heck			
(3)		mıddle east	aid for the needy	100,500 check	heck			
(14)		middle east	aid for the needy	10,020 check	heck			
(10)		middle east	humanitarian aid	156,737 check	heck			
(91)		middle east	educational prgrms	11,171 check	heck			

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

Enter total number of other organizations or entitles w,

N



Page 2

Schedule F (Form 990) 2016

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

(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of noncash	(h) Description of noncash assistance	(i) Method of valuation
plicable)			,	disbursement	assistance		(book, FMV, appraisal, other)
ц (1978)	middle east	educational prgrms	26,375	check			
L A	middle east	outreach prgms	50,000 check	check			
	middle east	pub awareness prgm	277,270 check	check			
i su	middle east	humanitarian aid	8,102 check	check			
L	middle east	educational prgrms	64,948 check	check			
U (3)	middle east	religious prgrms	120,000 check	check			
U E	middle east	educational prgrms	180,000 check	check			
	middle east	womens health	81,841 check	check			
	middle east	educational prgrms	10,500 check	check			
(10)	middle east	synagogue cnst	160,000 check	check			
	ddle cast	educational prgrms	43,607 check	check			
	กษ์d ól e gast	educational pryrms	5,000 check	check			
U The second sec	middle east	humanıtarian aıd	10,880 check	check			
	middle east	community projects	38,142 check	check			
	middle east	religious prgrms	7,960 check	check			
10.7	middle east	community projects	51.700 check	check			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 0

Enter total number of other organizations or entities

Schedule F (Form 990) 2016

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

Part IV,	line 15,	ny recipient who re	for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	5,000. Part II car	n be duplicated if ac	ditional space is r	needed.	
(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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		middle east	aid for the needy	20,000 check	check			
(2)	J	middle east	ald for the needy	15,000 check	check			
(c)		middle east	religious prgrms	6,000 check	check			
(6)		middle east	educational prgrms	457,200 check	check			:
(6)		middle east	community projects	5,402 check	check			
6)		middle east	pub awareness prgm	240,000 check	check			
$ \cdot ^{2}$		middle east	educational prgrms	53,276 check	check			
		middle east	religious prgrms	57,089 check	check			
(6)		middle east		7,115 check	check			
10)		niddle east	educational prgrms	5,120 check	check			
		nuddle cast	educational prgrms	20,000 check	check			
	muldle east	madle east	medical aid	8,500 check	check			
(EJ)		middle east	aid for the needy	5,000 check	check			
14)		middle east	ald for the needy	5,000 check	check			
(g)		middle east	educational prgrms	5,740 check	check			
10)	middle east	middle east	womens health	18,000 check	check			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

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

	(i) Method of valuation (book, FMV, appraisal, other)																
needed.	(h) Description of noncash assistance																
dditional space is	(g) Amount of noncash assistance																
more than \$5,000. Part II can be duplicated if additional space is needed	(f) Manner of cash disbursement	check	check	check	с	check	check	check	check	check	check	check	check	check	check	check	check
5,000. Part II car	(e) Amount of cash grant	269,190 check	30,005 check	10,000 check	8,300 check	10,000 check	7,191 check	5,800 check	574,925 check	8,025 check	50,500 check	26,680 check	10,303 check	8,000 check	35,500 check	25,000 check	190,570 check
		community projects	educational prgrms	womens health	humanitarian aid	and for the needy	humanitarian aid	humanitarian ald	food kitchen	aid for the needy	humanıtarıan aid	synagogue cnst	community projects	outreach prams	educational prgrms	educational prgrms	educational prgrms
line 15, for any recipient who received	(c) Region	middle east	middle east	middle east	middle east	middle east	middle east	middle east	middle east	middle east	middle east	middle east	middle cast	middle east	middle east	middle east	mıddle east
ine 15, for an	(b) IRS code section and EIN (if applicable)				middle east												
Part IV, I			Ø	(8)	(4)	(5)	(9)	(2)		(6)	(10)		65	(13)	(14)		(16)

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

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

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

Enter total number of other organizations or entities ო



Schedule F (Form 990) 2016

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

ran III can be duplic	Part III can be duplicated il additional space is i	s is lieeded.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) free loan - home removation	middle eact	-	2200		•		
	1000	- ,	L C				
(4) free loan -medical ald	middle east	-	¢78'/				
(3) free loan - home renovation	middle east	-	38,500				
(4) free loan - short term aid	middle east	-	5335				
(5)							
(9)							
(2)							
(8)							
(6)							
		1					
(11)	,	t I	1	f f 1			
(12)			1				1
(13)							
(14)							
(15)							
(16)							
(17)							
(18)			,				
						Sch	Schedule F (Form 990) 2016

Page	4

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," rganization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign oration (see Instructions for Form 926)	☐ Yes	☑ No
2	may Trust	he 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 s and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).	☐ Yes	₽ No
3	the o	he organization have an ownership interest in a foreign corporation during the tax year? If "Yes," rganization may be required to file Form 5471, Information Return of U.S. Persons With Respect To aim Foreign Corporations (see Instructions for Form 5471)	Yes	V No
4	qualit Inform	the organization a direct or indirect shareholder of a passive foreign investment company or a fied electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing (see Instructions for Form 8621)	☐ Yes	₽ No
5	the o	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 gn Partnerships (see Instructions for Form 8865)	☐ Yes	₽ No
6	"Yes,	ne organization have any operations in or related to any boycotting countries during the tax year? If " the organization may be required to separately file Form 5713, International Boycott Report (see actions for Form 5713; do not file with Form 990)	Yes	☑ No
			0 - b - d - d - E - (E	000/ 004

Supplemental information Provide the information required by Part I, line 2 (monitoring of funds): Part I, line 3, column (f) (accounting method, amounts of investments via expenditures per region): Part II, line 1 (accounting method): Part III (accounting method): and Part III, column (c) estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. schedule F part 1 line 2 some of the volunteers and administrators are residing in Israel and are in contact with the recipients on a recurring basis by phone and e-mail and on site visits schedule F part 1 line 3 col f as, the charity is all volunteer there are no expenditures other than the grants (and loans) themselves which are, by checks or bank or bank transfer schedule F part 3, accounting method our free loans to individuals and organizations are made by checks, and are reflected in the accounts receivable section of the 999 part y. If aloan is defaulted it is deducted from accounts receivables, we have over a 95% return on our loans, though many times. It takes more time than originally scheduled we made, 9 free loans this past year, 3 to charitable institutions and 6 to individuals.	Schedule F (Form 990) 2016 Page 5
some of the volunteers and administrators are residing in israel and are in contact with the recipients on a recurring basis by phone and e mail and on site visits schedule F part 1 line 3 col. f as the charity is all volunteer there are no expenditures other than the grants (and loans) themselves which are by checks or bank or bank transfer schedule F part 3 accounting method our free loans to individuals, and organizations are made by checks, and are reflected in the accounts receivable, section of the 990 part x if a loan is defaulted it is deducted from accounts recievables, we have over a 95% return on our loans, though many times, it takes more time, than originally scheduled	Part V	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
and e mail and on site visits schedule F part 1 line 3 col. f as the charity is all volunteer there are no expenditures other than the grants (and loans) themselves which are by checks or bank or bank transfer schedule F part 3 accounting method our free loans to individuals and organizations are made by checks and are reflected in the accounts receivable section of the 990 part x if a loan is defaulted it is deducted from accounts recievables , we have over a 95% return on our loans, though many times, it takes more time, than originally scheduled	schedule I	part 1 line 2
schedule F part 1 line 3 col. f as the charity is all volunteer there are no expenditures other than the grants (and loans) themselves which are by checks or bank or bank transfer schedule F part 3. accounting method our free loans to individuals and organizations are made by checks, and are reflected in the accounts receivable section of the 990 part x if a loan, is defaulted it is deducted from accounts recievables, we have over a 95% return on our loans, though many times, it takes more time, than originally scheduled	some of th	e volunteers and administrators are residing in israel and are in contact with the recipients on a recurring basis by phone
as the charity is all volunteer there are no expenditures other than the grants (and loans) themselves which are by checks or bank or bank transfer schedule F part 3 accounting method our free loans to individuals and organizations are made by checks and are reflected in the accounts receivable section of the 990 part x if a loan is defaulted it is deducted from accounts recievables , we have over a 95% return on our loans though many times it takes more time than originally scheduled	and e mail	and on site visits
bank transfer schedule F part 3 accounting method our free loans to individuals and organizations are made by checks and are reflected in the accounts receivable section of the 990 part x if a loan is defaulted it is deducted from accounts recievables , we have over a 95% return on our loans, though many times it takes more time than originally scheduled	schedule f	part 1 line 3 col f
schedule F part 3 accounting method our free loans to individuals and organizations are made by checks and are reflected in the accounts receivable section of the 990 part x if a loan is defaulted it is deducted from accounts recievables . we have over a 95% return on our loans though many times it takes more time than originally scheduled	as the cha	arity is all volunteer there are no expenditures other than the grants (and loans) themselves which are by checks or bank or
our free loans to individuals and organizations are made by checks and are reflected in the accounts receivable section of the 990 part x if a loan is defaulted it is deducted from accounts recievables . we have over a 95% return on our loans though many times it takes more time than originally scheduled	bank trans	ıfer
if a loan is defaulted it is deducted from accounts recievables . we have over a 95% return on our loans, though many times, it takes more time, than originally scheduled	schedule I	part 3 accounting method
more time than originally scheduled	our free lo	ans to individuals and organizations are made by checks and are reflected in the accounts receivable section of the 990 part x
	if a loan is	defaulted it is deducted from accounts recievables . we have over a 95% return on our loans, though many times, it takes
we made 9 free loans this past year, 3 to charitable institutions and 6 to individuals	more time	than originally scheduled
	we made	9 free loans this past year, 3 to charitable institutions and 6 to individuals
		·

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization \blacktriangleright Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

irs.gov/form990. Inspection
Employer identification number

centra	I Fund of Israel				13-2992985
Part	Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art-Works of art				
2	Art-Historical treasures				
3	Art-Fractional interests				
4	Books and publications		ANTERIOR DE NOTATION DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTR		
5	Clothing and household				
	goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property		<u></u>		<u> </u>
9	Securities—Publicly traded		9	110,078 76	selling price of stock
10	Securities-Closely held stock .				
11	Securities - Partnership, LLC,			1	
	or trust interests				
12	Securities-Miscellaneous		 		
13	Qualified conservation				İ
	contribution—Historic structures]
14		 -			
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies	ļ			
21	Taxidermy	ļ			<u> </u>
22	Historical artifacts				
23	Scientific specimens				
24 25	Archeological artifacts				
26	Other ► (
27	Other ► (
28	Other ► ()				
29	Number of Forms 8283 received	by the or	nanization during the tax i	year for contributions for	
	which the organization completed	Form 8283	3. Part IV. Donee Acknowle	daement	29
	,		, , ,	-9	Yes No
30a	During the year, did the organizat	tion receive	hy contribution any prope	erty reported in Part I. line	
	28, that it must hold for at least the	hree vears	from the date of the initial	contribution, and which is	s 1 through n't required
	to be used for exempt purposes i	for the enti	re holding period?		· · · · 30a V
b	If "Yes," describe the arrangemen				
31	Does the organization have a		otance policy that require	es the review of any r	nonstandard
	contributions?				· · · · 31 V
32a	Does the organization hire or use	e third par	ties or related organization	is to solicit, process, or s	
					· · · · 32a 🗸
b	If "Yes," describe in Part II.				W 12 23 17 17 20
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	pperty for which column (a)	ıs checked,

Part II.	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
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SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

Central Fund of Israel	13-2992985
990 part III line 4d	
Category # 4 - support of religious institutions Grants in this category are primarily for the support in	maintenance and the
construction of synagogues and other religious institutions and programs total expenses - 2,043,2	264 total grants - 2,043,264
category #5 medical services includes support for clinics and hospitals - aid to the blind & disabled	- postpartum depression
medical aid and therapy , in addition to construction & improvements to medical facilities	
total expenses - 388,644 total grants - 388,644	
category # 6 security programs - We saw an increase in terrorist all over the world. Israel is a leade	r in combatting terrorism on many
different levels. Total expenses in this category for 2016 were - 304,459 total grants - 304,459	
000 most VI Line 2	
990 part V1 line 2	
1 pair of board members are married to each other , and one is a son of another board member	
990 part V1 line 9	
Arthur Marcus 1 Hagoel St Efrat Israel	
Jay Marcus - 13 Hagoel St - Efrat Israel	
Dr Linda Kalish Marcus - 13 Hagoel St - Efrat Israel	
Mitchell Eichen - 5 HaMa'ayan St, Efrat Israel	
Mitchell Eichen - 5 HaMa'ayan St, Efrat Israel	
990 part VI line 11A	
copies of the 990 are e mailed to the different board members. The review is done by e mail, and, at or	ur annual meeting
990 par VI line 19	
upon request - financial & other documents are e- mailed or they are directed to public websites which	h maintain them

Schedule () (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
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