250

- 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2017

Department of the Treasury Internal Revenue Service

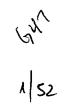
▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Do not criter social security numbers on and form as it may be made public
► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

4	For the 2	OT / cale	endar year, or tax year beginning	January 1	, 2017, at	na enaing	<u>Decem</u>	ber 31	, 20 17	_ <u>_</u> _
3	Check if a	pplicable	C Name of organization The Jerusal	lem Foundation			· J	D Employe	er identification number	0
	Address cl	hange	Doing business as						31 1529945	0
\exists	Name cha	•	Number and street (or P O box if ma	ail is not delivered to street a	ddress)	Room/suit	e	E Telephon		0
_	Initial retur	•	11 Rivka Str. POB 10185					ģ	972-2-6751711	Ō
ī	Final return/		0.4		· · · · · · · · · · · · · · · · · · ·			4		
	Amended		Jerusalem 9110101/Israel			G Gross red	ceipts \$ 80,615,	368		
Ħ	Application			<u> </u>					ubordinates? ☐ Yes ✓ N	
	тфриоцион	pending			,	こて	1		included? Yes N	
	Tax-exem	ot status	✓ 501(c)(3)) ◀ (insert no) ☐ 4	047(a)(1) or	3 3 527			list (see instructions)	
_	Website.		w.jerusalemfoundation.org) 4 (IIISEIT IIO) 🗀 4.	• (a)(1) O1 L		H(c) Group		•	
<u>,</u>	Form of ord			tion Other >	l Year	r of formation		T	of legal domicile	
È	art I	Summ		tion [] Other	L L. Cal	O IOIIIatio	911 1982	W State (i legal dofficile IL	
*				ion or most significant	activities:				 	
a	1	-	escribe the organization's missi	-	•					
Governance	1		salem Foundation creates opport	••••••	Growth, Edi	ucation, \	/ulnerable Po	opulation	s, Dialogue and	
Ľ			iving, Arts and Culture, Heritage				£ 14	000/ -4		
š	1		nis box ▶☐ if the organization of			sposea o	r more than	1 1	is net assets.	
	1		of voting members of the gover					3		<u>15</u>
S	1		of independent voting member	0 0	, , ,	,		4		<u> 15</u>
흝	1		mber of individuals employed in	, ,	Part V, line	2a)		5		0
Activities &			mber of volunteers (estimate if r		<u> </u>	 .		6		0
ĕ			related business revenue from F			 		7a		0
	b N	let unre	lated business taxable income	from Form-990-T-line	34	그의	<u>.</u>	7b		0
				E ALIC O	0 2010	RS-OS	Prior Yea	ar	Current Year	
ē	8 0	Contribu	itions and grants (Part VIII, line	1h) AUG. 0	2 2018	- Ju	26	,096,722	20,168,	875
Revenue			i service revenue (Part VIII, line :	2g)		<u> </u>		0		0
Š	10 ir	nvestme	ent income (Part VIII, column (A)), lines 3, 4, and 7d)	N HT	L	2	,301,655	5,664,	,257
E			venue (Part VIII, column (A), line			— ⊢	'n	,959,864	7,995,	,524
	12 T	otal rev	enue-add lines 8 through 11 (m	nust equal Part VIII, col	umn (A), lın	e 12)	30	,358,241	33,828,	,656
	13 0	arants a	ınd sımılar amounts paid (Part I)	X, column (A), lines 1-	3)		26	,532,362	28,012,	040
	14 E	Benefits	paid to or for members (Part IX	(, column (A), line 4)		$ abla$		0		0
Ø	15 S	Salaries,	other compensation, employee b	penefits (Part IX, columi	n (A), lines 5	i–10)	3	,337,052	3,450,	.074
Se			onal fundraising fees (Part IX, co			Γ		203,361	206,	
Expenses	`		idraising expenses (Part IX, colu			12.0	(一声)就为	1000	3 6 7 W W	
ш	-		penses (Part IX, column (A), line			·····		,346,119	981,	
	18° T		penses. Add lines 13-17 (must o		(A), line 25)		•	,418,894	32,649,	
			e less expenses. Subtract line 1	•				060,653)	1,178,	
≽ s	4 11					В	eginning of Cur		End of Year	
vet Assets or und Balances	20 T	otal ass	sets (Part X, line 16) .			. 🗀	92	,275,944	93,454,	892
ASS HBa	20 T		pilities (Part X, line 26)			–		,214,842	6,439,	
ĔĔ	22 N		ets or fund balances. Subtract I	ne 21 from line 20		· ·		,490,786	99,894,	
	art II		ture Block	<u></u>				,,		.00
			ury, I declare that I have examined this re	eturn including accompany	ing schedules	and statem	nents and to th	e hest of m	v knowledge and belief	ıt ıs
			elete Declaration of preparer (other than						,35 4.14 501101,	
	- 22	<u> </u>								
Sic	gn	Sign	nature of officer				Date	e	1 1	
_	re	V	INON OZ-ART	CFO	Vino	$_{n} \bigcirc_{z}$		•	7 30 201	X
•		Type	e or print name and title	<u> </u>	J/1101	1 - 2	- F) 1		100 /201	0_
			ype preparer's name	Preparer's signature		Dat	e		¬ . PTIN	—
	id			,		- "		Check _ self-empl	_J if [
	eparer	-		Ĺ		I	1_	1	·,·u	
Js	e Only							's EIN ▶		
100	v the IDS		address this return with the propagar	shown above? (coc :s:	truotiono\		Phor	ne no		
			s this return with the preparer s	· · · · · · · · · · · · · · · · · · ·	aructions)	<u> </u>			Yes N	<u>lo</u>
-^	Panenua	TE HOOLI	ICTION ACT NOTICE COS TRE CORSES!	(A INSTRUCTIONS		Cat Na	11000V		Form 25211 (2	111 /1



Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this	Part III								
1	Briefly describe the organization's mission:									
	The Jerusalem Foundation creates opportunities for Economic Growth, Educat	ion, Vulnerable Populations, Dialogue and								
	Shared Living, Arts and Culture, Heritage Preservation									
2	Did the organization undertake any significant program services during the	war which were not listed on the								
2	prior Form 990 or 990-EZ?	· · · · · Yes No								
	If "Yes," describe these new services on Schedule O.	· · · · · · · · · · · · · · · · · · ·								
3	Did the organization cease conducting, or make significant changes in	how it conducts, any program								
	services?	· · · · · · □ Yes □ No								
	If "Yes," describe these changes on Schedule O									
4	Describe the organization's program service accomplishments for each of									
	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									
	the total expenses, and revenue, it any, for each program service reported									
4a	(Code) (Expenses \$ 2,970,000 including grants of \$) (Revenue \$								
		, (, 10, 0, 10, 0, 10, 10, 10, 10, 10, 10,								
4b	(Code) (Expenses \$ 1,846,965 including grants of \$									
	Mishkenot Sha'ananim International Center - General support of seminars & con									
	- General support of Press Club									
4c	(Code) (Expenses \$ 1,281,617 including grants of \$) (Revenue \$								
-10	Greenberg's pool & sports complex - Construction	γ (πονοπασ φ								
		······								
4d	Other program services (Describe in Schedule O.)									
	(Expenses \$ 23,008,826 including grants of \$ 337,656) (Revenue)	e\$)								
4e	Total program service expenses ► 29.107.408									

Yes No

Checklist of Required Schedules Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)

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

election in effect during the tax year? If "Yes," complete Schedule C, Part II

- **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
- 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
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- **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
- 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
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
 - **b** Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
 - c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
 - **d** Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
 - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - **f** Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
 - **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
- Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14 a Did the organization maintain an office, employees, or agents outside of the United States?
 - **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV
- 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
- 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.
- 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)
- 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
- 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

1 2 3 4 5 6 7 8 10 11a 11b 11c 11d 11e 11f 12a 12b 13 14b 15 16 17 18 Form **990** (2017)

Old the organization operate one or more hospital facilities? If "Yes," complete Schedule H f "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Old 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 Old 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 Old 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	20a 20b 21 22	Yes	No ✓
f "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 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 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	20b 21		
Old 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 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 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	21		1
Old 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 Old 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			
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			1
Del de la companyation de la compa	23	✓	
ond 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		√
Old the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year o defease any tax-exempt bonds?	24b 24c		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit ransaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
s 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? ff "Yes," complete Schedule L, Part I.	25b		√
Oid the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		√
Old the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
Nas the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).	, , 1		(s
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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		√
Old the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Old the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			√
Old the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		
Nas 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		√
Old the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
elated organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	27		√
Oid 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	✓	•
	old the organization have a tax-exempt bond issue with an outstanding principal amount of more than in100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b hrough 24d and complete Schedule K. If "No," go to line 25a bid the organization mines are serrow account other than a refunding escrow at any time during the year? of defease any tax-exempt bonds? Indiction organization maintain an escrow account other than a refunding escrow at any time during the year? of defease any tax-exempt bonds? Indiction organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? of defease any tax-exempt bonds? Indiction 501(6)3, 501(6)4), and 501(6)(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 is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior ear, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 ("Yes," complete Schedule L, Part II is defended by the organization of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any unrent or former officers, directors, trustees, key employees, highest compensated employees, or isqualified persons? If "Yes," complete Schedule L, Part III is did the organization provide a grant or other assistance to an officer, director, trustee, key employee, ubstantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled intity or family member of any of these persons? If "Yes," complete Schedule L, Part III is a family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV in entity of which a current or former officer, director, trustee, or	imployees? If "Yes," complete Schedule J do the organization have a tax-exempt bond issue with an outstanding principal amount of more than old the organization have a tax-exempt bond issue with an outstanding principal amount of more than old the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Add the organization maintain an escrow account other than a refunding escrow at any time during the year of oldetes any tax-exempt bonds? Add the organization maintain an escrow account other than a refunding escrow at any time during the year of oldetes any tax-exempt bonds? Add the organization acts an "on behalf of" issuer for bonds outstanding at any time during the year? If the organization acts as in "on behalf of" issuer for bonds outstanding at any time during the year? If the organization with a disqualified person in a prior ear, and that the transaction bas not been reported on any of the organization's prior Forms 990 or 990-EZ7 ("ves," complete Schedule L, Part I and the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any urrent or former officers, directors, trustees, key employees, highest compensated employees, or issiqualified persons? If "Yes," complete Schedule L, Part I and the organization provide a grant or other assistance to an officer, director, trustee, key employee, ubstantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled thity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II, and the organization or leated to any tax-exempt or taxable entity? If "Yes,"	imployees? If "Yes," complete Schedule J obd the organization have a tax-exempt bond issue with an outstanding principal amount of more than old the organization have a tax-exempt bond issue with an outstanding principal amount of more than old the organization have a tax-exempt bond seyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization and as an "on behalf of" issuer for bonds beyond a temporary period exception? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? In the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? In the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization and as an "on behalf of" issuer for bonds beyond a disqualified person during the year? It is the organization reverse for any of these persons? If "Yes," complet

Part				_
-	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	. ∠ No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	<u>. </u>		2
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		1.5	١.,
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			. "
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 -	11.5 2	** **
	Statements, filed for the calendar year ending with or within the year covered by this return 2a		-	~'
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1	· .	٠,٠
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	√	<u> </u>
b	If "Yes," enter the name of the foreign country ISRAEL / SWITZERLAND / SPAIN		,	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts		34	3.7
	(FBAR)	د ,		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	Ļ	✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		١.
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	<u>6</u> b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).		iu jii	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		- ``=	
L		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		
С	required to file Form 8282?	7-		
		7c	- 1	ļ
d e	If "Yes," indicate the number of Forms 8282 filed during the year	70		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f	-	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	—		
•	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.	,	1.72	1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	١. '	4 ~	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		4 1	*
11	Section 501(c)(12) organizations. Enter],	- 5"	
а	Gross income from members or shareholders	1		٦.
b	Gross income from other sources (Do not net amounts due or paid to other sources]	الم عور	
	against amounts due or received from them.)		:	ļ <u>.</u>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	£*,	٠٠,	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	, ,	- 3	. , 5
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O	ļ., [¬]	· ,	, -
þ	Enter the amount of reserves the organization is required to maintain by the states in which	4	g.]
	the organization is licensed to issue qualified health plans	[*	. ' "	ľ .
С	Enter the amount of reserves on hand	12.	`-,	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u></u>	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u></u>	

Form 99	90 (2017)				age 6
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
	Check if Schedule O contains a response or note to any line in this Part VI				✓
Secti	on A. Governing Body and Management				
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 15	- 	es This	No
ь 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business in any other officer, director, trustee, or key employee?	1b 15 relationship with			·
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		✓
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 95 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?	on's assets? .	4 5 6 v	/	<u>√</u> <u>√</u>
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?		7b v	/	
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following	dertaken during		- ,	2 ,
а	The governing body?		8a 🗸	/	
ь 9	Each committee with authority to act on behalf of the governing body?	at he renghed at	8b √	'+	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the			le)	<u> </u>
		· · · · · · · · · · · · · · · · · · ·		'es	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 affiliates, and branches to ensure their operations are consistent with the organization's exemptions.		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	-	11a		✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		-	-	لب
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12a		<u>√</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the pascribe in Schedule O how this was done	oolicy? If "Yes,"	12c		
13	Did the organization have a written whistleblower policy?		13		✓
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation		14	**	<u>√</u>
а	The organization's CEO, Executive Director, or top management official		15a 🗸	/	
b	Other officers or key employees of the organization		15b ✓	-	
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 simi	lar arrangement	: 1	-	
	with a taxable entity during the year?		16a		<u>√</u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	to safeguard the	16b	٠ المراجعة المراجعة	
Secti	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T (Section	1 501(c)((3)s (only)
19	available for public inspection. Indicate how you made these available. Check all that apply. Own website	•	erest po	olicy,	and
20	State the name, address, and telephone number of the person who possesses the organization	on's books and re	cords Þ	•	

Form 990 (2017) Page **7**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, 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 employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	n nor any relate	d org	anız	atio	n c	ompe	nsa	ted any currer	t officer, director	, or trustee.
(C)										
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average								Reportable	Estimated
	hours per					or/trust		compensation from	compensation from related	amount of other
	week (list any hours for	오코	Officer		ξe.	e H	δ	the	organizations	compensation
	related	Individual trustee or director	<u></u>	Cer	Key employee	ploy	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ot all	l on		olqı	8 5	ľ	(W-2/1099-MISC)		organization and related
	line)	rus.	1 2		yee	npe				organizations
		e e	Institutional trustee			Highest compensated employee				
						-				,
(1) Sallaı Meridor	1									
Board Member & Foundation Chairman		✓						0	0	0
(2) Ruth Cheshin	11		1							
Board Member & former President		✓	_				_	0	0	0
(3) David Brodet	1		,							
Board Chairman		✓						0	0	0
(4) Zvı Agmon	0.5									
Board Member		✓						0	0	0
(5) Yoram Belizovsky	0 5	١,								
Board Member		✓						0	0	0
(6) Tamar Ben David	0.5			ĺ						
Board Member		✓						0	0	0
(7) Moshe Vidman	0.5	,								
Board Member		✓					-	0	0	0
(8) Prof. Meir Heth	<u>1</u>		,							
Board Member		✓						0	0	
(9) Gary Leibler	1	,								
Board Member		1						0	0	0
(10) Dan Suesskind	1	,								
Board Member		✓		_				0	0	0
(11) Harry Sapir	1									
Board Member		1					<u> </u>	0	_0	0
(12) Ronit Abramson	0.5									
Board Member		✓						0	0	0
(13) Stuart Hershkowitz	0.5	,							1	
Board Member		✓	\vdash			-	<u> </u>	0	0	0
(14) Dr. Yoni Shimshoni	0.5	,								
Board Member		✓	L				<u></u>	0	0	Eorm 990 (2017)

Par	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	yees		nd F	lighes	st C	ompensated E	mployees (conti	nued)
	(A) Name and title	(B) Average hours per	box,	unles	Pos eck s pe	ition more	than one that the the that the the that the that the that the that the that the that the the the the the the the the the th	an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	Alan Hassenfeld	0.5							-		
	Member Johanna Arbib	50	✓						0	0	0
Presid	*****	30				✓			172,354	0	8,215
	Anat Tzur	50				,					
CEO	Vinon Oz Ari	50		-		✓			155,532	0	9,825
CFO	Yinon Oz Arı	50				1			118,409		7,651
	isa Avnerı	50			_				110,100		.,,,,,,
Legal	Advisor					✓			94,087	0	4,855
	Nomi Yeshua Development Officer	50				/			112,990	0	4 200
(21)	bevelopment Officer					•			112,990	0	4,386
(22)											
(23)						_					
40.41											
(24)											
(25)											
1b	Sub-total	•							653,372		34,932
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	•	n A 		•			▶	653,372		34,932
2	Total number of individuals (including but reportable compensation from the organi	not limited		ose	lıst	ed a	above	e) w		ore than \$100,00	
3	Did the organization list any former of							mp	loyee, or high	est compensate	Yes No
4	employee on line 1a? If "Yes," complete 5 For any individual listed on line 1a, is the organization and related organizations	sum of rep	oortal	ole d	com	per	satio				
5	individual Did any person listed on line 1a receive o									ation or individu	al
Sasti	for services rendered to the organization on B. Independent Contractors	' If "Yes," c	omple	ete :	Sch	edu	iie J f	or s	uch person		5 🗸
1	Complete this table for your five highest compensation from the organization Rep										
	year.	<u> </u>								· · · · · · · · · · · · · · · · · · ·	
	(A) Name and business addi	ress							(B) Description of se	ervices	(C) Compensation
NONE							_				
2	Total number of independent contracto							th	ose listed abo	ove) who $\frac{z^n}{z_n^n}$.	
	received more than \$100,000 of compensation	auon irom t	ne or	yanı	zati	on I				r ¹ ,,	Form 990 (2017)

8/25

Par	t VIII	Chack if Schodule O		rocn	anco or noto t	any lina in this	Part VIII		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	""	Check if Schedule O		a respond	onse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ons, Gifts, Grants Similar Amounts	1a b c	Federated campaigns Membership dues Fundraising events . Related organizations		1a 1b 1c 1d					
Contributions, G and Other Simil	e f	Government grants (con All other contributions gi and similar amounts not inc	tributions) fts, grants, luded above	1e	1,811,897 18,356,978		3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	a yak	
Sont and (g h	Noncash contributions includ Total. Add lines 1a–1		1f \$	-	20,168,875			
	<u> </u>			Ė	Business Code	20,100,073	4 7 7 1		1
Program Service Revenue	2a b c d e								
rogi	f q	All other program sen Total. Add lines 2a–2		e L				l Sant Sant Sant Sant Sant Sant Sant Sant	
	3 4	Investment income and other similar amo	(including unts) .		nds, interest,	1,935,787			
	5	D		<u> </u>	· >	617,968	617,968		
	6a b	Gross rents . Less rental expenses Rental income or (loss)	6	9,664 1,823 7,841	(ii) Personal				
	d	Net rental income or (657,841	657,841		
	7a	Gross amount from sales of assets other than inventory	(i) Securitie		(ii) Other				
	b	Less cost or other basis and sales expenses .	48,59 46,69		1856266 24895				5.4
	d	Gain or (loss) . Net gain or (loss)	1,89	7,099	1,831,371 ►	3,728,470	3,728,470		*** *** ******************************
Other Revenue	8a	Gross income from fu events (not including \$ of contributions reporte See Part IV, line 18		a)					
ğ	b	Less direct expenses		b					
	9a	Net income or (loss) fit Gross income from ga See Part IV, line 19	ming activit		vents . ►		The state of the s		242
	С	Less direct expenses Net income or (loss) fi Gross sales of in	om gaming	_	ties >	A Salar Carrier	- 12 1 4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s	3 2 2
	b	returns and allowance Less cost of goods s	es old	a b		A CASE			
	С	Net income or (loss) fi		inver	Business Code	HARA WEAR TO	A CALL	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	11a b	unrealized gain(loss) in	vestments			6,719,715			
	C	All other revenue						,	
	d e	Total. Add lines 11a-			•	6,719,715		KAT (A)	7 1 7 ha
	12	Total revenue. See in	structions	<u></u>	▶	33.828.656	13,659,781		Form 990 (2017)
									· 500 000 (2017)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (D) Fundraising (A) Total expenses Program service expenses Management and general expenses 8b, 9b, and 10b of Part VIII. expenses 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 28,012,040 28,012,040 Benefits paid to or for members . 5 Compensation of current officers, directors, trustees, and key employees 570,928 140,312 213,513 217,103 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 1,689,596 567,416 372,132 750,048 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 255,783 86,735 56,313 112,735 9 Other employee benefits . 616,878 200,013 333,287 83,578 10 Payroll taxes 316,889 100,892 80,959 135,038 11 Fees for services (non-employees) а Management Legal . . b 36,352 36,352 Accounting . C 37,712 37,712 Lobbying . . d Professional fundraising services. See Part IV, line 17 e 206,465 206,465 f Investment management fees . . 6,933 6,933 g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 106,403 106,403 13 Office expenses . . . 143,413 130,857 12,556 14 Information technology 59,539 59,539 15 Royalties 16 Occupancy . 93,009 93,009 17 210,503 24,407 186,096 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 9,919 9,919 20 Interest . . 21 Payments to affiliates 22 Depreciation, depletion, and amortization 204,503 204,503 23 Insurance 16,354 16,354 24 Other expenses. Itemize expenses not covered 211 above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) а other miscellaneous 56,489 56,489 b C d е All other expenses 25 Total functional expenses. Add lines 1 through 24e 32,649,708 29,107,408 1,819,941 1,722,359 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)

	art X	·			rage II
	aitA	Check if Schedule O contains a response or note to any line in this Pa	ert X		
		onsolvin concodule o contains a response of flote to any line in this fe	(A)	<u> </u>	(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	4,113,115	1	3,799,042
	2	Savings and temporary cash investments	2,355,502	-	2,555,393
	3	Pledges and grants receivable, net	9,849,340		2,973,032
	4	Accounts receivable, net	418,524		2,259,646
	5	Loans and other receivables from current and former officers, directors,	The state of the s	# t .	· · · · · · · · · · · · · · · · · · ·
		trustees, key employees, and highest compensated employees.		£ 0° • ¾,	
		Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section	S. C. S.	7,	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	The second secon	-	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		1/2/2	
ţ		organizations (see instructions) Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	3,686,850	7	3,880,839
Ä	8	Inventories for sale or use	0	8_	0
	9	Prepaid expenses and deferred charges	14,683	9	13,546
	10a	Land, buildings, and equipment cost or		14.4	The results
		other basis. Complete Part VI of Schedule D 7,997,253			
	b	Less accumulated depreciation 10b 2,598,929			5,398,324
	11	Investments—publicly traded securities	69,510,434		75,093,528
	12	Investments—other securities. See Part IV, line 11	117,684		29,750
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets See Part IV, line 11	3,891,396		3,891,396
	16	Total assets. Add lines 1 through 15 (must equal line 34)	99,490,786		99,894,496
	17	Accounts payable and accrued expenses	4,502,396		3,456,815
	18 19	Grants payable	2,012,736		2,129,607
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	
Ø	22	Loans and other payables to current and former officers, directors,	اله در م وقي ري کي ري د	4 ,	0
Liabilities	22	trustees, key employees, highest compensated employees, and		12	
pili		disqualified persons. Complete Part II of Schedule L	0	22	0
Lia	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties .	0		0
	25	Other liabilities (including federal income tax, payables to related third		·	<u> </u>
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	699,710	25	853,182
	26	Total liabilities. Add lines 17 through 25	7,214,842		6,439,604
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		Fi	1.00
ces		complete lines 27 through 29, and lines 33 and 34.		Charles Charles	
Fund Balances	27	Unrestricted net assets	35,125,534	27	38,412,254
Bal	28	Temporarily restricted net assets	27,379,629	28	22,774,642
р	29	Permanently restricted net assets	29,770,781	29	32,267,996
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and		\mathcal{F}^{2}	
ō		complete lines 30 through 34.	الله الله الله الله الله الله الله الله		
ets	30	Capital stock or trust principal, or current funds	0		0
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund	0	_	0
Ϋ́	32	Retained earnings, endowment, accumulated income, or other funds	0		0
S	33	Total net assets or fund balances	92,275,944		93,454,892
	34	Total liabilities and net assets/fund balances	99,490,786	34	99,894,496

orm 9	90 (2017)			Pa	gel∠
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1		33,82	8,656
2	Total expenses (must equal Part IX, column (A), line 25)	2		32,64	9,708
3	Revenue less expenses. Subtract line 2 from line 1	3		1,17	8,948
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		92,27	5,944
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		93,45	4,892
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990	plaın ı	in	7. C	* Y. S.
_	Schedule O.				لئيب
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				<u>√</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	olled o	1 4 7	1	2 2
	reviewed on a separate basis, consolidated basis, or both		n.	" ··	
	Separate basis Consolidated basis Both consolidated and separate basis				. S
þ	Were the organization's financial statements audited by an independent accountant?		2b	V	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a ' ' '		130
	separate basis, consolidated basis, or both				·
	Separate basis Consolidated basis Both consolidated and separate basis		'	×	لعنا
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the control of the cont		_		
	of the audit, review, or compilation of its financial statements and selection of an independent accounts.			√	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O	plain i	n "	-, ⁷ ,	?(
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth i	ın 3a		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao th			<u> </u>
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Forr	n 990	(2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

The Jerusalem Foundation

Employer identification number

31 1529945

Par	t I Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.	
The o	organization is not a private founda	ation because it	is (For lines 1 through	12, che	ck only or	ne box.)		
1	A church, convention of churc							ng
2	A school described in section							() ()
3	A hospital or a cooperative ho							V
4	A medical research organization hospital's name, city, and state	e .					. ,	
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	or operate	ed by a government	al unit	described in
6 7	☐ A federal, state, or local gover☐ An organization that normally described in section 170(b)(1)	receives a subs	stantial part of its sup				n the g	eneral public
8	A community trust described i	n section 170(b)(1)(A)(vi). (Complete	Part II)				
9	An agricultural research organ or university or a non-land-gra university							
10	An organization that normally in receipts from activities related support from gross investment acquired by the organization a	to its exempt fu t income and un	inctions—subject to c related business taxal	ertain exi ble incon	ceptions, ne (less si	and (2) no more tha ection 511 tax) from	n 331/3	% of its
11	☐ An organization organized and	l operated exclu	sively to test for public	c safety.	See sect	ion 509(a)(4).		
12	An organization organized and							
	of one or more publicly support Check the box in lines 12a thro							
а	Type I. A supporting organ	ization operated	d, supervised, or contr	olled by	its suppo	rted organization(s),	typica	lly by giving
	the supported organization supporting organization. Ye					he directors or trust	ees of	the
b	☐ Type II. A supporting organ							
	control or management of organization(s). You must	complete Part l	IV, Sections A and C.	•				
С	Type III functionally integ its supported organization(ally inte	egrated with,
d	☐ Type III non-functionally i	integrated. A su	ipporting organization	operated	d in conn	ection with its suppo	rted o	rganization(s)
	that is not functionally integree requirement (see instruction						d an a	ttentiveness
е	Check this box if the organ functionally integrated, or						e II, Тур	oe III
f	Enter the number of supported of	organizations						
g	Provide the following information	about the supp	oorted organization(s)					
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	other	Amount of support (see structions)
				Yes	No			
(A)				_				
(B)								
(C)								
(D)		-						
(E)								
Total		96 1.51	11 m 2 m 2 m 2 m) ~ ·	No.			

Cat No 11285F

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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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") .	43,377,259	34,868,813	29,178,962	26,096,722	20,168,875	153,690,631
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 .	43,377,259	34,868,813	29,178,962	26,096,722	20,168,875	153,690,631
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)						43,412,840
6	Public support. Subtract line 5 from line 4	1 2 5 x	100	17.00	· '> 'S' .	212	110,277,791
Secti	on B. Total Support					,	
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	43,377,259	34,868,813	29,178,962	26,096,722	20,168,875	153,690,631
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,496,386	3,413,876	2,797,243	3,832,469	3,273,419	3,273,419
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2× 30 - V	6 FA 10 10 11 11 11 11 11 11 11 11 11 11 11				
11	Total support. Add lines 7 through 10	The said see		The state of the s	Table 4. 1 mm by	- K	170,504,024
12	Gross receipts from related activities, etc	•				12	504/ \/0\
13	First five years. If the Form 990 is for the organization, check this box and stop he	_			-		n 501(c)(3)
Sooti	on C. Computation of Public Support			· · · · ·		• • • •	
14	Public support percentage for 2017 (line			1 column (fl)	-	14	04.00.9/
15	Public support percentage for 2017 (line support percentage from 2016 Sci			1, Column (1))		15	64 68 % 80 38 %
16a	331/3% support test—2017. If the organ						
	box and stop here. The organization qua						. ▶ 🗸
b	331/3% support test—2016. If the organi	zation did not	check a box o	n line 13 or 16	a, and line 15	ıs 33 ¹ /3% or m	
	this box and stop here. The organization						. ▶ □
17a							
b 18	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization resupported organization Private foundation. If the organization describes the supported organization of the organization describes	ation meets the meets the "factors".	e "facts-and-c ts-and-circums	circumstances' stances" test.	' test, check the the organization of the organization of the	this box and son qualifies as	a publicly .
10	instructions				i, or 17b, check	n una bux and	> □

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

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

Secti	on A. Public Support						/	
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) [/] Total	
1	Gifts, grants, contributions, and membership fees							
	received (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities					/		
	furnished in any activity that is related to the							
	organization's tax-exempt purpose .							
3	Gross receipts from activities that are not an					/		
	unrelated trade or business under section 513							
4	Tax revenues levied for the					/		
	organization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities					,		
	furnished by a governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3							
	received from disqualified persons							
b	Amounts included on lines 2 and 3				Í	_		
-	received from other than disqualified			/	ĺ			
	persons that exceed the greater of \$5,000							
	or 1% of the amount on line 13 for the year		j					
С	Add lines 7a and 7b				-			
8	Public support. (Subtract line 7c from	M. 3. 18 19 19 19 19 19 19 19 19 19 19 19 19 19	3,	1 /500 A	A	11,541,541 215,541		
	line 6)		, , , , , , , , , , , , , , , , , , ,					
Section	on B. Total Support		,	/				
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014 /	(c) 2015	(d) 2016	(e) 2017	(f) Total	
9	Amounts from line 6		/					
10a	Gross income from interest, dividends,		/					
	payments received on securities loans, rents,		/					
	royalties, and income from similar sources		/					
b	Unrelated business taxable income (less		/					
	section 511 taxes) from businesses		/					
	acquired after June 30, 1975 .							
С	Add lines 10a and 10b		/					
11	Net income from unrelated business	/						
	activities not included in line 10b, whether	/						
	or not the business is regularly carried on	/ /						
12	Other income Do not include gain or	/						
	loss from the sale of capital assets	/						
	(Explain in Part VI.)		_					
13	Total support. (Add lines 9, 10c, 11,	/						
	and 12)							
14	First five years. If the Form 990 is for the	, -	i's first, second	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)	
	organization, check this box and stop he				· · · · ·		. ▶ 🗆	
Section C. Computation of Public Support Percentage								
15	Public support percentage for 2017 (line 8	B, column (f) dı	vided by line 1	3, column (f))		-	%	
16	Public support percentage from 2016 Sch					16	%	
	on D. Computation of Investment In					Т Т		
17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 %							
18	Investment income percentage from 2016 Schedule A, Part III, line 17							
19a								
	17 is not more than 331/3%, check this box							
Ь	331/3% support tests 2016. If the organiz							
00	line 18 is not more than 331/3%, check this	-	-	-				
20	Private foundation. If the organization di	a not check a	pox on line 14,	19a, or 19b, c				
	/				Sch	edule A (Form 99	0 or 990-EZ) 2017	

Yes No

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Part IV Supporting Organizations

Section A. All 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.)

						-			-		
1	Are all of the	organization's	supported	organizations	listed	by	name	ın	the	organization's	governing

- 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)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- **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.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - 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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Part	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)		7,342	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u>L</u>
Secti	on B. Type I Supporting Organizations			1
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			-4.7
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		,	3 3
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	,	•	* 1
	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	L	<u>- ' -</u>	المراجعة ا
_		1	<u> </u>	
2	Did the organization operate for the benefit of any supported organization other than the supported	· -		. 9
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	-	, '	1
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization			
		2		
Secti	on C. Type II Supporting Organizations		r	1
			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	-	ŀ	24
	or management of the supporting organization was vested in the same persons that controlled or managed		-	(A) 9
	the supported organization(s)	1_		L
Secti	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 2		`
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		۰. "	9.4
	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		, ŧ	, , ,
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)		# <u>-</u>	
_		2	, ,,	a 10"
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			1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		` ′	٠,٠
	supported organizations played in this regard		<u> </u>	
C4!		3_		L
Secu	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	instru	ction	s)
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 in:	struct	ions)
•	Astruites Test American (a) and (b) below		V	NI-
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			5
	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	3 %	٠,٠,	:
	that these activities constituted substantially all of its activities	2a		
L	•	Za	,	, 4
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			1 1
	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	\$,	- ปุ
	activities but for the organization's involvement).	<u> </u>	
•		2b	1 25	
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	4 1 1	3.25	~~4
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI			لـــنــــا
	trustees of each of the supported organizations? Provide details in Part VI .	3a		-
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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 - Mınimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	4 - 11 - 11 - 11 - 11 - 11 - 11 - 11 -		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)	£ 2		10 m
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		The state of the s	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	The state of the state of	
2 Enter 85% of line 1.	2	or of white the first of	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	Carry Carry Tanger	
4 Enter greater of line 2 or line 3	4	- 2 de 1977 2 may	
5 Income tax imposed in prior year	5	The second of the second	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	y in	tegrated Type III supporting	organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continued)	
	ion D - Distributions	<u> </u>	•	Current Year
1	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.	 		
9_	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i)	(ii) Underdistributions	(iii) Distributable
_	,	Excess Distributions	Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	2		
2	Underdistributions, if any, for years prior to 2017		1 -3 -30 77 - 8	
-	(reasonable cause required—explain in Part VI) See	A Second Second		3,
	instructions			
3	Excess distributions carryover, if any, to 2017	11. 1. 1. 2.	か 一本のできる は	N
а		£ 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	"是一个是一个	
b	From 2013		A CANAGE CONTRACTOR	, ,
С	From 2014	The same of the same	位,对编码。上一个	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
d	From 2015	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		7 4 2 1 2 2 2 3
е	From 2016	4. 5. 1. 5.	The property adverty	
f	Total of lines 3a through e		at a standing of	
g	Applied to underdistributions of prior years	The state of the s		
h	Applied to 2017 distributable amount	、かいいいかい 「機能	上京・八大型は第三十八十二日	
i_	Carryover from 2012 not applied (see instructions)	134	Tide . The	19.2
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f		B - War with	4 2
4	Distributions for 2017 from	华 森		
	Section D, line 7 \$			
a	Applied to underdistributions of prior years	دوا پيد		
b	Applied to 2017 distributable amount		72 30 20 20 12-	
c	Remainder, Subtract lines 4a and 4b from 4.		以 は ない いっこん	i in
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.		n - multi-	· , · , , , , , , , , , , , , , , , , ,
6	Remaining underdistributions for 2017. Subtract lines 3h	± ,		
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.		177 . 1974	
7	Excess distributions carryover to 2018. Add lines 3 _j and 4c.			
8	Breakdown of line 7		A S Come S Come	- ",
a	Excess from 2013		The Attachment of	The state of the s
<u>_</u>	Excess from 2014	A CONTRACTOR OF THE PARTY OF TH	THE STREET STREET	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
C	Excess from 2015	رَّةُ الْمَارِينِ الْمَارِينِ الْمَارِينِ الْمَارِينِ الْمَارِينِ الْمَارِينِ الْمَارِينِ الْمَارِينِ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	83, 1,51
d	Excess from 2016	2	17 17 17 17 17 17 17 17 17 17 17 17 17 1	
е	Excess from 2017	40 15 1	The said of the said	3,1

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	•••••••••••••••••••••••••••••••••••••••
	······································
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SCHEDULE D (Form 990)

Department of the Treasury

b Assets included in Form 990, Part X

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

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization Employer identification number The Jerusalem Foundation 31 1529945 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?. ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . ☐ Yes ☐ No 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1

Schedule D (Form 990) 2017

Cat No 52283D

Par	Organizations Maintaining	Collections of A	rt, Historical 1	reasures, or O	ther Similar Ass	ets (continued)	
3	Using the organization's acquisition, a collection items (check all that apply)						
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	grams		
b	☐ Scholarly research		e 🗌 Othei	r			
С	☐ Preservation for future generations						
4	Provide a description of the organizati XIII	on's collections ar	nd explain how t	hey further the or	ganızatıon's exem	pt purpose in Part	
5	During the year, did the organization sassets to be sold to raise funds rather					r □ Yes □ No	
Par							
	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.						
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or othe	r intermediary fo	or contributions o	r other assets not	Yes 🗌 No	
b	If "Yes," explain the arrangement in Pa	rt XIII and complet	te the following ta	able			
					Am	nount	
С	Beginning balance			10	С		
d	Additions during the year			10	d		
е	Distributions during the year .			10			
f	Ending balance .			1			
2a	Did the organization include an amount				•		
Par	If "Yes," explain the arrangement in Pa	rt XIII. Check here	if the explanation	n nas been provid	ed on Part XIII .	· ·	
rai	Complete if the organization	answered "Ves"	on Form 990 F	Part IV June 10			
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back	
1a	Beginning of year balance	60,974,250	61,196,396				
b	Contributions	340,129	(473,859)				
С	Net investment earnings, gains, and	5,0,72	(110,000)	2,007,00	31,007,000	(0,000)	
	losses	8,624,157	2,134,637	306,252	(2,982,681)	3,095,023	
d	Grants or scholarships	0	0				
е	Other expenditures for facilities and						
	programs	(2,136,324)	(1,683,112)	(1,554,303)	(1,121,628)	(1,769,102)	
f	Administrative expenses	(257,498)	(199,812)	(261,256)	(285,930)	(176,934)	
g	End of year balance	67,544,714	60,974,250			33,400,686	
2	Provide the estimated percentage of th			, column (a)) held	as		
a	Board designated or quasi-endowment		%				
b C	Permanent endowment ► 41.4 Temporarily restricted endowment ►	16% 6.58%					
·	The percentages on lines 2a, 2b, and 2		n%				
За	Are there endowment funds not in the	*		at are held and ac	lministered for the	•	
	organization by		G-			Yes No	
	(i) unrelated organizations					3a(ı) ✓	
	(ii) related organizations					3a(ıı) ✓	
b	If "Yes" on line 3a(ii), are the related org	ganizations listed a	as required on Sc	chedule R?		3b	
4	Describe in Part XIII the intended uses		n's endowment fu	ınds.			
Part	Part VI Land, Buildings, and Equipment.						
	Complete if the organization a	answered "Yes"	on Form 990, F	Part IV, line 11a.	See Form 990, F	art X, line 10.	
	Description of property	(a) Cost or othe (investment		ther) d	Accumulated epreciation	(d) Book value	
1a	Land	1,	745,381	L by	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,745,381	
b	Buildings	5,	340,582		2,053,015	3,287,567	
C	Leasehold improvements						
d	Equipment		911,290		545,914	365,376	
e Total	Other	est oqual Form 00/) Part Y column	(P) (po 100)			

Part VII	Investments - Other Securities				
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, Im	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	у	(b) Book value		hod of valuation -of-year market value
(1) Financial	derivatives				
	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G) (H)					
	him and an al-Form 000 Book V and Billion 101 h			, , , , , ,	
Part VIII	b) must equal Form 990, Part X, col (B) line 12) ► Investments—Program Related				<u> </u>
Part VIII	Complete if the organization ans		rm 000 Dart IV lin	o 11c Soo Form	000 Part V June 12
	(a) Description of investment	weled les offici	(b) Book value	1"	thod of valuation
	(a) Description of investment		(b) Book value		of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (I	b) must equal Form 990, Part X, col (B) line 13)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A
Part IX	Other Assets.				
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(4	a) Description			(b) Book value
(1)					· · · · · ·
(2)					
(3)					<u>.</u>
(4)					
(5)					
(6)					
<u>(7)</u>					
(8)					
(9)	mn (b) must equal Form 990, Part X, c	ol (R) line 15)		•	
Part X	Other Liabilities.	or (B) line 15)			
raitA	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lın	e 11e or 11f. See	e Form 990, Part X,
	line 25.	T "			**
1.	(a) Description of liability	(b) Book value			
(1) Federal in			0		The same of the sa
	ce pay to employees	85	53,182		
(3)					
(4)					
(6)					
(7)				上方数學和代數	· 在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
(8)					A COLOR LANGE
(9)		<u> </u>			
	o) must equal Form 990, Part X, col. (B) line 25.)				
	uncertain tax positions. In Part XIII, provi	lde the text of the foots	ote to the organization	n's financial stateme	ints that reports the
	s liability for uncertain tax positions under				
-	,	, ,			,

Schedule D (Form 990) 2017 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements N/A 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a Ť Donated services and use of facilities . 2b **c** Recoveries of prior year grants . . 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d 2e N/A 3 3 N/A Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines 4a and 4b 4c N/A Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 N/A Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements . . . 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a ٠., Prior year adjustments . 2b 10 c Other losses 2c d Other (Describe in Part XIII) . . 2d e Add lines 2a through 2d . 2e 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b . . C 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Endowment fund income is used for grants and program cost to promote the purposes of the Jerusalem Foundation Part V line 1b - Endowment Funds Contributions in column (b) Three years back includes \$ 31,007,655 (included in unrestricted net assets) that have been restricted by the Negative contributions are a result of (1)accrual calculations (2)Donor's changing the condition of restriction.

The Jerusalem Foundation has no such tax liabilities

chedule D (Form 990) 2017 Page 5						
Part XIII	Supplemental Information (continued)					
-		***************************************				
		•••••				

SCHEDULE F (Form 990)

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(10)

(11)

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

The Jerusalem Foundation 31 1529945 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other 1 assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) offices in the employees, agents, and a program service, describe specific type of expenditures for and investments region independent service(s) in the region in the region in the region (1) Middle East&North Africa Fund-raising Prog (2)Grants 19,033,334 (3) 10,074,074 Constructions (4) Mgmt & Gen. Exp 1,722,359 (5) Fund-raising 1,671,595 (6)(7) Europe Fund-raising 51,199 (8)(9)

(12)			
(13)			
(14)		·	
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(15)			 	
(16)	-			
(17)				
3a	Sub-total		the state of the s	32,552,561

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

sheets to Part I

Totals (add lines 3a and 3b)

Cat. No. 50082W

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Schedule F (Form 990) 2017

32,552,561

Page 2

Schedule F (Form 990) 2017

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)
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146 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

Schedule F (Form 990) 2017 Part II Continuation of	of Grants and Ot	Other Assistance	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ites. (Schedule	= (Form 990)	, Part II)		
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	A STATE	Middle East & North Africa	Construction of sports complex	2,970,000	check or Bank transfer			
And Market Control of the Control of	1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	Middle East & North Africa	Maintenance and renovation, General support- exhibits, seminars & conferences	1,846,965	check or Bank transfer			
The state of the s	The second of th	Middle East & North Africa	Planning & Construction of pool & sports complex	1,281,617	check or Bank transfer			
The state of the s	The state of the s	Middle East & North Africa	General support	813,404	check or 813,404 Bank transfer			
The state of the s		Middle East & North Africa	General Support and Scholarship Subsidies	751,422	check or Bank transfer			
Carlotte Control of the Control of t	一	Middle East & North Africa	Research Grants & General support	744,902	check or Bank transfer			
18 18 18 18 18 18 18 18 18 18 18 18 18 1	1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	Middle East & North Africa	Planning & Construction of Theatre, General Support & Subsidies for activities	715,208	check or Bank transfer			
		Middle East & North Africa	Education enrichment and cultural activities	708,396	check or Bank transfer			
		Middle East & North Africa	General Support and Enrichment Activities	601,165	check or Bank transfer			
1		Middle East & North Africa	General Support	582,845	check or Bank transfer			
· · · · · · · · · · · · · · · · · · ·	A STATE OF THE STA	Middle East & North Africa	Construction & facilities and General support - Jerusalem Cinematheque	520,228	check or Bank transfer			
	A STATE OF THE STA	Middle East & North Africa	Construction & Maintenance of Park	519,514	check or Bank transfer			
· · · · · · · · · · · · · · · · · · ·		Middle East & North Africa	Renovation & Equipment of Coexistence Center + General support	517,969	check or Bank transfer			
	The second secon	Middle East & North Africa	Scholarships	508,481	check or Bank transfer			
		Middle East & North Africa	The Musayoff National Gallery for Archeology	500,000	check or Bank transfer			
		Middle East & North Africa	Activities at Music Center	467,461	check or Bank transfer			
		Middle East & North Africa	Activities at Music Center	451,733	check or Bank transfer			
()								

Part Continuation o	Continuation of Grants and Other Assistance	her Assistan	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)	, Part II)		
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	The state of the s	Middle East & North Africa	Activities at Community Center	449,190	check or Bank transfer			
The second secon	A CONTRACTOR OF THE STATE OF TH	Middle East & North Africa	General Support and Exhibits of Museum	433,183	check or Bank transfer			
9 (g)	***	Middle East & North Africa	cultural activities	426,845	check or Bank transfer			
		Middle East & North Africa	Renovation of community center for elderly in the old city	420,058	check or Bank transfer			
the state of the s	A Company of the second of the	Middle East & North Africa	Education Activities at Bretter Laboratories, High Schools Oriented Studies	417,578	check or Bank transfer			
And the state of t	The state of the s	Mıddle East & North Afrıca	General Support and Subsidies for Theatre culture activities	414,797	check or Bank transfer			
	The state of the s	Middle East & North Africa	General Support and Exhibits of Museum	408,167	check or Bank transfer			
A Company of the state of the s	A Control of the Cont	Middle East & North Africa	Funding High School Oriented Studies	400,610	check or Bank transfer			
	All the state of t	Mıddle East & North Afrıca	General Support	383,118	check or Bank transfer			
		Mıddle East & North Afrıca	General Support and Exhibits of Museum	381,261	check or Bank transfer			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	Education enrichment	357,217	check or Bank transfer			
10 mg 1 mg		Middle East & North Africa	General support-seminars and conferences	322,868	check or Bank transfer			
The state of the s	大学 大学 は、 できない	Mıddle East & North Afrıca	Vocational training programs	308,450	check or Bank transfer			
A STATE OF THE STA	STATE OF THE STATE	Mıddle East & North Africa	General Support of the Tony Elyashar Center for Child Abuse and Neglect	295,806	check or Bank transfer			
	A Comment of the Comm	Mıddle East & North Afrıca	Schoolarships	294,981	check or Bank transfer			
		Mıddle East & North Afrıca	Sport activities for youth	293,704	check or Bank transfer			
	F	Mıddle East & North Afrıca	General Support and Cultural Activities of Botanic Garden	293,221	check or Bank transfer			

Schedule F (Form 990) 2017 Part II Continuation c	of Grants and Ot	Other Assistance	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule I	= (Form 990)	, Part II)		
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East & North Africa	Activities at Community Center	290,322	check or Bank transfer			
		Middle East & North Africa	High School, Education enrichment & General support	250,114	check or Bank transfer			
		Middle East & North Africa	Renovation of therapeutic family center for at-risk children	240,363	check or Bank transfer			
		Middle East & North Africa	General Support	222,905	check or Bank transfer		:	
			Renovations & Educational Activities	195,081	check or Bank transfer			
The second secon		Middle East & North Africa	Renovation of kindergarden	180,766	check or Bank transfer			
The state of the s	والم المراجع ا	Middle East & North Africa	Planning & Construction of hall at community center	178,632	check or Bank transfer			
	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	Construction & Maintenance of Park	175,827	check or Bank transfer			
		Middle East & North Africa	Activities at Community Center	173,025	check or Bank transfer			
A CONTRACTOR OF THE SECOND SEC	一一	Middle East & North Africa	Activities at Community Center	163,429	check or Bank transfer			
	S. S	Middle East & North Africa	Activities at Community Center	159,583	check or Bank transfer			
A Company of the Comp	10 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	Middle East & North Africa	Equipment & activities ai community center for elderly	146,344	check or Bank transfer			
A STATE OF THE STA	1 3 3 4 4 5 4 5 4 5 5 5 6 5 6 5 6 5 6 5 6 5 6	Middle East & North Africa	General Support/Enrichment Activities for Elderly	145,589	check or Bank transfer			
		Middle East & North Africa	Mozaıka mural	135,982	check or Bank transfer			
The second secon	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	General Support and Subsidies for Theatre culture activities	135,729	check or Bank transfer			
		Middle East & North Africa	Renovations, Equipment & activities at community center for elderly	128,354	check or Bank transfer			
		Middle East & North Africa	Maintenance and gardening	126,619	check or 126,619 Bank transfer			
3								

Schedule F (Form 990) 2017 Part II Continuation of Grants	and	Other Assistance	se or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule I	F (Form 990)	Part II)		•
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	nt of sh	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
9		Middle East & North Africa	General Support	122,836	check or Bank transfer			
		Middle East & North Africa	Cultural activities	110,336	check or Bank transfer			
The state of the s		Mıddle East & North Afrıca	Scholarships	99,859	check or Bank transfer			
Control of the second of the s	Age and the second seco	Middle East & North Africa	Activities at Community Center	95,175	check or Bank transfer			
The state of the s		Middle East & North Africa	Activities at Community Center	94,734	check or Bank transfer			
A second of the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	Activities at Music & Dance Center	94,153	check or Bank transfer		,	
The second secon	The state of the s	Middle East & North Africa	General support for dance	828'68	check or Bank transfer			
A Company of the Comp		Mıddle East & North Africa	Activities at Community Center	87,127	check or Bank transfer			
		Middle East & North Africa	General support	85,895	check or Bank transfer			
		Middle East & North Africa	Art Scholarships	84,567	check or Bank transfer			
And the second s	The state of the s	Middle East & North Africa	Education Activities	83,281	check or Bank transfer			
A Second	A CO	Middle East & North Africa	General support	83,059	check or Bank transfer			
		Middle East & North Africa	Renovation & Equipment for School	79,327	check or Bank transfer			
	Action of the second of the se	Middle East & North Africa	Cultural events ın Jerusalem	78,005	check or Bank transfer			
		Mıddle East & North Afrıca	General Support/Enrichment Activities for Elderly	77,158	check or Bank transfer		,	
		Middle East & North Africa	Psychology services in High Schools	63,749	check or Bank transfer			
		Middle East & North Africa	General support	61,874	check or Bank transfer			

Schedule F (Form 990) 2017 Part II Continue	ation	of Grants and Oth	and Other Assistance	e or Entities Outside the United States. (Schedule F (Form 990), Part II)	ites. (Schedule I	F (Form 990),	Part II)		٠
(a) Name of Organization	ation	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		-	Mıddle East & North Afrıca	Enrichment activities	61,298	check or Bank transfer			
		And the second s	Middle East & North Africa	Renovation of school	61,047				
	3	d ,	Middle East & North Africa	General support	58,631	check or Bank transfer			
		,	Mıddle East & North Afrıca	Scholarships	58,406	check or Bank transfer			
The state of the s		A Company of the same	Middle East & North Africa	Coexistence activities	54,580				
The state of the s	H	had sold for the s	Mıddle East & North Africa	Cultural activities	54,211	check or Bank transfer			
The second secon		The second of the second	Middle East & North Africa	General support	49,266	check or Bank transfer			
The second secon		***	Middle East & North Africa	Coexistence activities	48,274	check or Bank transfer			
1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	الم المراجعة	大学 大	Mıddle East & North Afrıca	Construction of Multidisciplinary Center for children with hearing impairments	47,976	check or Bank transfer			
And the second s	And the second s	The state of the s	Mıddle East & North Afrıca	Cultural activities	46,219	check or Bank transfer			
The state of the s	The state of the s	A Comment of the Comm	Middle East & North Africa	planning an auditorium at Herzl Museum	44,638	check or Bank transfer			
A CONTRACTOR OF THE PROPERTY O	Committee of the Commit	Compared to the control of the contr	Mıddle East & North Africa	General Support and Subsidies for Theatre culture activities	44,038				
See the second s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Middle East & North Africa	General support	43,889	check or Bank transfer			
	And the second s	Marie Committee	Mıddle East & North Africa	Enrichment Activities and Subsidies for Treatment for Children with special Needs	43,434	check or Bank transfer			
Section of the sectio	The state of the s	San	Mıddle East & North Afrıca	Enrichment programs	42,390	check or Bank transfer			
4 1 1 1 1			Middle East & North Africa	Coexistence activities	42,042	check or Bank transfer			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		A STATE OF THE STA	Mıddle East & North Afrıca	Coexistence activities	40,643	check or 40,643 Bank transfer			;
2									

Schedule F (Form 990) 2017 Part II Continua	ation	of Grants and Other	ner Assistance	se or Entities Outside the United States. (Schedule F (Form 990), Part II)	ites. (Schedule	F (Form 990)	, Part II)		•
(a) Name of Organization	ganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
,			Middle East & North Africa	Maintenance of Gardens	39,881	check or Bank transfer			
	egen and a second		Middle East & North Africa	General Support	39,549	check or Bank transfer			
			Middle East & North Africa	General support	39,034	check or Bank transfer			
17 17	The state of the s		Middle East & North Africa	Enrichment programs	37,996	check or Bank transfer			
	The state of the s	The state of the s	Middle East & North Africa	Enrichment Activities and Subsidies for Treatment for Children with special Needs	37,249	check or Bank transfer			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Mıddle East & North Africa	General support for art school	36,774	check or Bank transfer			
			Middle East & North Africa	Maintenance of Gardens	34,871	check or Bank transfer			
	A CONTRACTOR OF THE PROPERTY O		Middle East & North Africa	Renovations & Cultural activities	33,961	check or Bank transfer			
16, 2, 3, 3, 4, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Middle East & North Africa	Planning of Co-existence youth center	33,383	check or Bank transfer			
	The state of the s	rantamental transfer for the	Middle East & North Africa	Renovations of the Secular Yeshiva	31,894	check or Bank transfer			
A THE STATE OF THE	A CONTRACTOR OF THE PROPERTY O	A STATE OF THE STA	Middle East & North Africa	Cultural activities	31,711	check or Bank transfer			
		to the second of a second to second the second to second the second to second the second to seco	Middle East & North Africa	Activities at Community Center	29,714	check or Bank transfer			
The second of th	Company of the state of the sta		Middle East & North Africa	General support	28,560	check or Bank transfer			
Bertham Anderson	The state of the s	The state of the s	Middle East & North Africa	Education enrichment and cultural activities for the ultra-orthodox community	24,150	check or Bank transfer			:
			Middle East & North Africa	Activities at Community Center	23,170	check or Bank transfer			
	As the Same of		Middle East & North Africa	Construction of sports complex	22,557	check or Bank transfer			
			Middle East & North Africa	Equipment & activities	22,163	check of check of Bank transfer			

Schedule F (Form 990) 2017 Part II Continua	ation	of Grants and Oth	and Other Assistance	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)	, Part II)		•
(a) Name of Organization	ganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
Na Na		.,	Middle East & North Africa	Co-existence activities	21,112	check or Bank transfer			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3.0		Middle East & North Africa	General support	21,019	check or Bank transfer			
1			Middle East & North Africa	General support	21,015	check or Bank transfer			
To an and a second	大学、 Martin Mar	Service Control of the Control of th	Middle East & North Africa	Activities at Community Center	19,749	check or Bank transfer			
4.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Middle East & North Africa	General Support and Scholarship Subsidies	19,466	check or Bank transfer			
2 2 2 1 7 3 3 2	The state of the s	- Application of the second	Middle East & North Africa	General Support	19,423	check or Bank transfer			
	The state of the s	A STATE STATE OF THE STATE OF	Middle East & North Africa	General support	18,273	check or Bank transfer			
	The state of the s	The state of the s	Middle East & North Africa	Scholarships	16,505	check or Bank transfer			
2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		And the state of t	Middle East & North Africa	General Support/Enrichment Activities for children with special needs	15,917	check or Bank transfer			
	4.85 m	, , , , , , , , , , , , , , , , , , ,	Middle East & North Africa	General support	15,775	check or Bank transfer			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	General support	15,370	check or Bank transfer			
The state of the s	A Company of the Comp	The state of the s	Middle East & North Africa	Education enrichment and cultural activities for the ultra-orthodox community	15,124	check or Bank transfer			
	Section 1. The section of the sectio	Plane policy of the property o	Middle East & North Africa	General Support and Exhibits of Museum	14,920	check or Bank transfer			
The state of the s	A Company of the Comp	A STATE OF THE STA	Middle East & North Africa	General support for dance	13,111	check or Bank transfer			
1	A STATE OF THE STA	the state of the s	Middle East & North Africa	General support	12,976	check or Bank transfer			
	A Company of the second of the	1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	Middle East & North Africa	General Support and Scholarship Subsidies	12,808	check or Bank transfer			
	The state of the s		Middle East & North Africa	Coexistence activities	11,411	check or 11,411 Bank transfer			
3							ļ.		

Schedule F (Form 990) 2017 Part II Continuation of	of Grants and Ot	Other Assistance	ce or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule I	= (Form 990)	, Part II)		•
(a) Name of Organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	nt of sh ice	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	A 14	Middle East & North Africa	General support battered women's shelter	11,399	check 01 Bank transfer			
	20 mg day	Mıddle East & North Africa	Cultural activities	11,392	check or Bank transfer			
		Middle East & North Africa	General support	10,858	check or Bank transfer			
المان المعالم المرابع ا	A STATE OF THE STA	Middle East & North Africa	Educational activities for Former Haredim	10,419	check or Bank transfer			
The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	General support	10,044	check or Bank transfer			
	The state of the s	Middle East & North Africa	General Support and Scholarship Subsidies	10,029	check or Bank transfer			
A STATE OF THE STA	The state of the s	Middle East & North Africa	General support	9,911	check or Bank transfer			
The state of the s		Middle East & North Africa	General support	9,835	check or Bank transfer			
The state of the s	The state of the s	Mıddle East & North Afrıca	General support battered women's shelter	9,265	check or Bank transfer			
		Middle East & North Africa	General support	9,194	check or Bank transfer			
The state of the s	1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Middle East & North Africa	General Support and Subsidies for Theatre culture activities	9,139	check or Bank transfer			
	1	Mıddle East & North Africa	General support for dance	8,846	check or Bank transfer			
は ない は は は は は は は は は は は は は は は は は は		Mıddle East & North Africa	Scholarships	8,422	check or Bank transfer			
	A Company of the Comp	Mıddle East & North Afrıca	Maintenance of Gardens	8,304	check or Bank transfer			
		Mıddle East & North Afrıca	maintenance of therapeutic pool	8,144	check or Bank transfer			
		Mıddle East & North Afrıca	Activities at Community Center	7,959	check or Bank transfer			
	7, 26, 15 7, 26, 15 7, 16, 17 7, 18, 18, 18, 18, 18, 18, 18, 18, 18, 18	Middle East & North Africa	Maintenance of Gardens	7,899	check or Bank transfer			

Part II C	ontinuation of	Grants and Other	her Assistand	Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)	ates. (Schedule	F (Form 990)	, Part II)		
(a) Name of Organization	ıızatıon	(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 (h) Description non-cash of non-cash assistance assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		****	Middle East & North Africa	Scholarships	292'2	check or Bank transfer			
			Middle East & North Africa	Cultural & Coexistance activities	7,141	check or Bank transfer	:		
y 3,		33	Mıddle East & North Africa	General support	7,084	check or Bank transfer			
1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 43 4 1 5 4 55 4 1 1 1 1 1 1 1 1 1 1 1 1 1	از جره المراجع	ंदुर्गे Middle East & North Africa	General support	620'2	check or Bank transfer			
A Comment of the Comm	Same Sale Harden	State of the state	Middle East & North Africa	General support	6,084	check or Bank transfer			
A Section of the sect	And the state of the state of	a strategies at smile.	Mıddle East & North Afrıca	General support for dance	6,023	check or Bank transfer			
The state of the s	The fact of the contract of the contract of	ا اه	المجابة Middle East & North Africa	General support	2,693	check or Bank transfer			
	A Company of the standard of t	Middle East & North Africa	Mıddle East & North Africa	General support	2,590	check or Bank transfer			
大学 できる	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Middle East & North Africa	Coexistence activities	5,579	check or Bank transfer			
	الم المراقع ال	25 miles de deserve 27 miles	Mıddle East & North Afrıca	General support	5,096	check or Bank transfer			

Page 3

(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) Scholarships	Middle East & N.Africa	8	5,461 check	check			actual amount
(2)							
(3) essential white goods							
(4) for elderly & needy individuals	Middle East & N.Africa	130			55,348	55,348 distribution of refregerators	~
(5)						heaters, washing machines	
(9)						etc	
(7) Gift cards for Passover							
(8) to holocaust survivors	Middle East & N Africa	370			24,75(24,750 Gift cards	
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
ć							

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	☐ Yes	✓ No

Dard	W	

Supplemental Information

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

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

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

▶ Attach to Form 990 or Form 990-EZ. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990 for the latest instructions Employer identification number Name of the organization 31 1529945 The Jerusalem Foundation Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply 1 e Solicitation of non-government grants а f Solicitation of government grants Internet and email solicitations b g

Special fundraising events Phone solicitations ✓ In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes □ No. If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) (III) Did fundraiser have (vi) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts custody or control of contributions? (II) Activity or entity (fundraiser) from activity fundraiser listed in organization col (i) Yes No ¹ Gabriale Appel TEC Pavillon Donor Liaison 84,501 51,199 33,302 Germany 2 3 4 5 6 7 8 9 10 **Total** 84,501 51,199 33.302 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. NONE

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

Cat No 50083H

Pa	art II	Fundraising Events. Con than \$15,000 of fundraising gross receipts greater tha	ng event contributions			
		<u> </u>	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
	2	Less Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
uses	6	Rent/facility costs .				
Direct Expenses	7	Food and beverages				
Direct	8	Entertainment				
	9	Other direct expenses .				
	10 11	Direct expense summary Ad Net income summary. Subtra				
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9	e organization answei	red "Yes" on Form 99	90, Part IV, line 19, or	reported more
Revenue		than \$10,000 on 1 on 1 5	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	│	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d) .	>	
	a Ist	ter the state(s) in which the or the organization licensed to co No," explain	•	s in each of these states		Yes No
10	? Yes No					

Schedu	ele G (Form 990 or 990-EZ) 2017
11 12	Does the organization conduct gaming activities with nonmembers?
13	Indicate the percentage of gaming activity conducted in
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name ▶
	Address ►
15a	
	revenue?
	Name ►
	Address►
16	Gaming manager information
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	□ Director/officer □ Employee □ Independent contractor
17 a	Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
art I	
he ag	reement specifie that in addition to the monthly fee, all direct expenses are reimbursed.
ı add	ition to the compensation, direct travel and office costs of \$ 8,748 were reimbursed to Gabriele Appel.
	•••••••••••••••••••••••••••••••••••••••

SCHEDULE J (Form 990)

Compensation Information

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

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

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

The Jerusalem Foundation

Employer identification number

31 1529945

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.	.; -	7	- 4
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use		ri T	, ,
	☐ Travel for companions ☐ Payments for business use of personal residence		27 3	"
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees	2	"" " " " " " " " " " " " " " " " " " "	1
	☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)		, e	, "4 , "1
		*14	1.2	' '
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment	1,4,	135° 148° 1	نت
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	l		ĺ
	6. piam	1b		ام ، ما
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			لصنيما
	1a ⁹	2		
			\$	[,[]
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the	Ι, .	5. "	4
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			î,
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		X.	1 1
	☐ Compensation committee ☑ Written employment contract		4	1
	☐ Independent compensation consultant ☐ Compensation survey or study		\$ 5	1, 1
	Form 990 of other organizations Approval by the board or compensation committee	, ,		'
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	, a	34	
	organization or a related organization	, ~	13/	
а	Receive a severance payment or change-of-control payment?	4a		✓
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		✓
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		✓
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	21 /	, , , , , , , , , , , , , , , , , , ,	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	-		.
•	compensation contingent on the revenues of	,	war.	
а	The organization?	5a	*******	1
b	Any related organization?	5b	-	1
-	If "Yes" on line 5a or 5b, describe in Part III.			<u> </u>
		4 5		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	١,	٠,,	.
-	compensation contingent on the net earnings of	1	11.	1 1
а	The organization?	6a	سنخ	1
b	Any related organization?	6b		1
-	If "Yes" on line 6a or 6b, describe in Part III.	1	30	-1
	The strains out of out, decorated in that the	د		- 1
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		·
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	<u> </u>	<u> </u>	
_	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe	1	1	
	In Part III	8	1	/
				1
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	-	استتدسا	4
_	Regulations section 53.4958-6(c)?	9		:

Page 2

Schedule J (Form 990) 2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

(F) Compensation in column (B) reported as deferred on prior Form 990 Note: The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. 180,569 165,357 (E) Total of columns (B)(I)–(D) o: 0 (D) Nontaxable benefits 8,215 9,825 (C) Retirement and other deferred compensation 13,071 20,757 (iii) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation (ii) Bonus & incentive compensation 159,282 134,775 (i) Base compensation 2333 ΞΞ ΞΞ Ξ ΞΞ ΞΞ ΞΞ ΞΞ ΞΞ 3 ΞΞ ΞΞ ΞΞ 1 Johanna Arbib - President (A) Name and Title 2Anat Tzur - CEO က 5 9 ø 6 4 7 9 F 7 5

Schedule J (Form 990) 2017

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90) 2017 pplem	formati nal inf										
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Schedule J (Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.										

SCHEDULE 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.

2017
Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

The Jerusalem Foundation	31 1529945
Form 990	
Part I line 5 & Part V line 2a	
The Jerusalem Foundation employs 52 individuals in Israel .	
Part III line 4d	
- A total of \$ 17,186,369 was used for activities and support of programs in the areas of community set	rvices, art &culture, and coexistence.
- A total of \$ 5,822,457 was used for construction & renovation of projects.	
Part IV line 12	
The Financial statements are prepared in accordance with Israeli GAAP	
Part V line 6a	
Contributions from US Donors are received and receipted by the Jerusalem Foundation Inc. for project	s of the Jerusalem Foundation
in Israel. Contributions to the Jerusalem Foundation Inc. are tax deductible in accordance with section	170.
Part VI line 2	
- Ruth Chesin & Meir Chet are related	
Part VI line 6, 7a,7b	
The members elect the governing body, appoint the Executive Committee Board members (see Part VII), approve signatory rights, elect
external & internal auditor and audit committee, approve audited financial statements and authorize ch	anges in bylaws
Part VI line 11a&b	
The 990 is prepared by the Chief Accountant and reviewed by the Organization's CFO.	
Part VI line 15	
An Executive Personnel Committee determines the compensation of key employees, in line with comp	ensation of comparative functions
and qualifications in other entities	
Part VI line 19	
Upon request The Audited Financial Statements and other statutory documentation and information is	s filed with the Government Registrar
of Associations in Israel and is available to the general public	
Part VII	
The foundation does not compensate directors or trustees	

Cat No 51056K

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

Schedule O (Form 990 or 990-EZ) (2017)

Employer identification number Name of the organization 31529945 The Jerusalem Foundation Part XI re line 5 The unrealized gains (losses) on inverstments are reported in Part VIII line 11a and therefore are not included in Part XI As of Jan 1 2017, the nonprofit retroactively applied statement of opinion 79, the gifts noted below are considered income or additions to restricted net assets because (a) the information existed before approval of the financial statements (b) there is evidence of a legally enforceable commitment by the donor/giver during the reporting period (c) the gift was received before approval of the financial statements and (d) the gift is not conditioned on future events The Foundation has restated the Contributions receivable comparative figures in the 31 December 2016 report The effect on the financial statements due to the change in accounting is as follows As previously reported Change As now reported Form 990 - Part I line 8 - Prior Year 25,576,074 520,648 26,096,722 Form 990 - Part I line 12 - Prior Year 29,837,593 520,648 30,358,241 Form 990 - Part I line 19 - Prior Year (2,581,301) 520,648 (2,060,653) Form 990 - Part I line 20 - Prior Year 111,215,569 (18,939,625) 92,275,944 Form 990 - Part I line 22- Prior Year 118,430,411 (18,939,625) 99,490,786 Form 990 - Part X line 3- Beginning of year 28,788,965 (18,939,625) 9,849,340 Form 990 - Part X line 16- Beginning of year 118,430,411 (18,939,625) 99,490,786 Form 990 - Part X line 28- Beginning of year 46,319,254 (18,939,625) 27,379,629 Form 990 - Part X line 33- Beginning of year 111,215,569 (18,939,625) 92,275,944 Form 990 - Part X line 34- Beginning of year 118,430,411 (18,939,625) 99,490,786 Form 990 - Part XI line 4- Prior Year 111,215,569 (18,939,625) 92,275,944 Schedule A- Part II colum (d) line 1, 4, 7 25,576,074 520,648 26,096,722 Schedule A- Part II line 15 80.33% 80.38%