efile GRAPHIC print - DO NOT PROCESS As Filed Data -**Return of Organization Exempt From Income Tax** Form **990** 

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

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

DLN: 93493319080948 OMB No 1545-0047

Department of the Treasury

foundations)

▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

Open to Public

			calendar year, or tax year beginn	ning 01-01-2017 , and end	ing 12-3	1-2017			
		pplicable change	JEWISH FEDERATION COUNCIL OF G	REATER LA			D Employ	er identil	ication number
	me ch	_	% Ivan Wolkınd				95-164	3388	
□ Ini	tıal ret	turn	Doing business as						
		n/terminated I return	Number and street (or P O box if ma	ulus not doluvorod to stroot address	I Poom/su	ıto	E Telephor	ne number	
		a recurn on pending	CEDE WILCHIDE BLVD	ii is not denvered to street address;	Roomysu	ite	(323) 7	'61-8000	
·			City or town, state or province, count	ry, and ZIP or foreign postal code			(525).		
			LOS ANGELES, CA 90048				<b>G</b> Gross re	eceipts \$ 6	4,008,093
			F Name and address of principal	officer		H(a) Is this	a group re	turn for	
			IVAN WOLKIND 6505 WILSHIRE BLVD				dinates?		□Yes ☑No
			LOS ANGELES, CA 90048			H(b) Are al		tes	☐ Yes ☐No
Ta	x-exen	npt status	<b>☑</b> 501(c)(3)	nsert no )	<b>527</b>			list (see	instructions)
W	ebsit	e:► WV	VW JEWISHLA ORG			H(c) Group	exemption	number	<b>&gt;</b>
						1 V	t 1027	M Ct-t-	-£   d - CA
Forr	n of or	ganızatıon	Corporation Trust Assoc	lation ☐ Other ►		<b>L</b> Year of forma	ition 1937	M State	of legal domicile CA
Pa	rt I	Sum	mary						
	1	Briefly de	scribe the organization's mission or	most significant activities					
بر د	=	SEE SCHE	EDULE O						
	-								
2	-								
5			is box <b>&gt;</b>				of its net a	assets	58
8			of independent voting members of				_	4	58
2			mber of individuals employed in cale		•			5	239
É	l		mber of volunteers (estimate if nece	, , ,	•			6	1,325
į	l		related business revenue from Part	, ,				7a	6,607
	l		lated business taxable income from	* **				7b	4,606
				·		Pri	or Year		Current Year
a,	8	Contribut	tions and grants (Part VIII, line 1h)				44,796,	587	51,113,230
Rəvenue	9	Program	service revenue (Part VIII, line 2g)				1,871,	558	1,892,336
ÿ∧ċ.	10	Investme	ent income (Part VIII, column (A), l	ines 3, 4, and 7d )			1,058,	290	3,631,194
ш.	11	Other rev	venue (Part VIII, column (A), lines !	5, 6d, 8c, 9c, 10c, and 11e)			-17,	479	39,528
	12	Total rev	enue—add lines 8 through 11 (mus	t equal Part VIII, column (A), l	line 12)		47,708,	956	56,676,288
	13	Grants a	nd sımılar amounts paıd (Part IX, co	olumn (A), lines 1–3 )			22,354,	189	22,859,928
	l		paid to or for members (Part IX, co	` '' '				0	(
\$			other compensation, employee ber	, , , , , , , , , , , , , , , , , , , ,	•		17,721,		18,230,676
eg:	16a	Profession	onal fundraising fees (Part IX, colum	nn (A), line 11e)			44,	042	36,156
Expenses	l		raising expenses (Part IX, column (D), lin						
_	l		penses (Part IX, column (A), lines 1	•			12,088,		11,206,598
	ı	•	penses Add lines 13–17 (must equa less expenses Subtract line 18 fro				52,208, -4,500,		52,333,358
<u></u>	19	Revenue	less expenses Subtract line 16 from	m line 12	• •	Reginning	of Current Y		4,342,930 End of Year
Fund Balances									
Bak	20	Total ass	sets (Part X, line 16)				147,474,	863	162,580,919
2 2	21	Total liab	oilities (Part X, line 26)				34,165,	882	35,846,264
<u> </u>	22	Net asse	ts or fund balances Subtract line 2	1 from line 20			113,308,	981	126,734,655
	t III		l <b>ature Block</b> perjury, I declare that I have examır	and this return, including accor		achadulas and	ctatomont	s and to	the best of my
now	ledge	and belie	ef, it is true, correct, and complete						
ny k	nowle	edge							
						201	8-11-13		
ign		Signat	cure of officer			Date	= <del></del>		
lere			WOLKIND CFO/COO						
		17	or print name and title	<u> </u>					
			Print/Type preparer's name KARA ADAMS	Preparer's signature KARA ADAMS	D	Oate Che		PTIN P0002331	<del></del> 5
aic'			Firm's name FRNST & YOUNG US LLF				employed n's EIN ►		
-	pare	;ı  -	Firm's name FERNST & YOUNG US LLF				ne no (949)	794-2300	
Jse	On	ıy	IRVINE, CA 92612				(545)	2500	
1===	he ID	S discuss	this return with the preparer show	n ahove? (see instructions)					/es □ No
ıav E	. I K	1155							1 1711

Cat No 11282Y

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For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (20	17)					Page <b>2</b>
Par	t III	Statement	of Program Service	e Accomplis	hments		
		Check if Sched	dule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly (	describe the o	rganization's mission		•		
SEE :	SCHEDUL	E O					
2	Did the	organization	undertake any significa	ant program ser	vices during the year w	hich were not listed on	
	the pric	or Form 990 or	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes,	" describe the	se new services on Scl	nedule O			
3	Did the	organization	cease conducting, or m	nake significant	changes in how it cond	ucts, any program	
	services	s?					🗌 Yes 🗹 No
	If "Yes,	" describe the	se changes on Schedu	le O			
4	Section	501(c)(3) and		ons are required	to report the amount	largest program services, as mea of grants and allocations to others	
	(Code		) (Expenses \$	23,462,317	including grants of \$	13,762,971 ) (Revenue \$	1,931,679 )
	•	itional Data	, (				
4b	(Code		) (Expenses \$	12,317,818	including grants of \$	8,598,867 ) (Revenue \$	0)
	See Add	itional Data					
4c	(Code		) (Expenses \$	3,089,692	ıncludıng grants of \$	498,090 ) (Revenue \$	0)
	See Add	itional Data					
4d	Other p	program servic	ces (Describe in Sched	ule O )			
	(Expen	ses \$	inc	uding grants of	\$	) (Revenue \$	)
4e	Total p	orogram serv	/ice expenses ▶	38,869,8	27		

or X as applicable

**Checklist of Required Schedules** 

1

Page 3

No

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . .

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .

**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 . . . . . . . . . . . . .

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

8

Yes

9

10

11a

11b

11c

11d

11e

11f

12a

13

14a

14h

15

16

17

18

19

Nο

Nο

Νo

No

Nο

Nο

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29

Page 4 Part IV Checklist of Required Schedules (continued) Yes

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.

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," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🔧

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . .  $\,$ 

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . .

20a 20b

Yes

Yes

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

Yes

Yes

Yes

Yes

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No

Nο

Νo

Νo

Nο

Νo

Nο

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

orm	990 (2017)			Page
Par				
	Check if Schedule O contains a response or note to any line in this Part V	•		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   108		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return	. I		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
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	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
	If res, to line 3a of 3b, and the organization meronii 6060-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
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		
9a	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		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	-Ja		
c	Enter the amount of reserves on hand			
		امدا		No
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1,10

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Par	<b>TVI</b> Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "Name of the content of the conten	'o" respo	nse to l	_
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Se	ction A. Governing Body and Management			
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year 1a 5	8		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
		8		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	on <b>3</b>		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	<u>.</u>		
	members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	,   		
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed►  CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only available for public inspection. Indicate how you made these available. Check all that apply	)		
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20	policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  Nam Wolking 6505 Will SHIPE BLVD 105 ANGELES CA 20048 (323) 761-8000			

orm 990 (2	017)										Page <b>7</b>
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's <b>current</b> off tion Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's <b>current</b> key		•								
vho received organization	organization's five <b>current</b> high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's <b>former</b> office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's <b>former dire</b> , more than \$10,000 of reportab	ectors or trust le compensation	<b>ees</b> that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Name and Title

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

amount of other

Page 8

	week (list any hours		oth a direct			and a		from the organization (W-	from related organizations (W	-	compen from	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trust⊖e	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		rganizat relat organiza	ed
See Additional Data Table												
										$\perp$		
1b Sub-Total	art VII, Sectio	nΑ.				<b>&gt;</b>	l					
d Total (add lines 1b and 1c)						<b>&gt;</b>		2,330,504	0			360,931
2 Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rec	eived more than \$1	00,000			
											Yes	No
3 Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule 3</i>									employee on	3		No

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

Position (do not check more

than one box, unless person

Reportable

compensation

Reportable

compensation

4

5

Description of services

SECURITY SERVICES

TRAVEL SERVICES

BOOK DISTRIB SVCS

EVALUATION SERVICES

JANITORIAL SERVICES

Yes

No

784,551

765,084

478,574

274,962

240,002

Form 990 (2017)

Compensation

Average

hours per

organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

1

NASTEC INTERNATIONAL

CALABASAS, CA 91302 WORLD EXPRESS TRAVEL

TARZANA, CA 91356

23945 N CALABASAS ROÁD SUITE 208

18425 BURBANK BLVD SUITE 512

HAROLD GRINSPOON FOUNDATION,

2040 BANCROFT WAY SUITE 400 BERKELEY, CA 94704

9601 WILSHIRE BLVD SUITE GL-25 BEVERLY HILLS, CA 90210

ADVANCE BUILDING MAINTENANCE INC.

compensation from the organization ▶ 12

67 HUNT STREET SUITE 100 AGAWAM, MA 01001 INFORMING CHANGE,

Section B. Independent Contractors

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the

services rendered to the organization? If "Yes," complete Schedule I for such person .

Name and business address

Part '	VIII Statement of Revenue  Check if Schedule O contains a	respo	onse or note to any	ine in this Part VI	II			🗆
		·		<b>(A)</b> Total revenue	Relate exe	B) ted or empt ction enue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	1a Federated campaigns	1a			1 100	enue		312-314
unts	<b>b</b> Membership dues	<b>1</b> b	106,866					
90 E	c Fundraising events	1c	10,000,316					
fš. ⊈	<b>d</b> Related organizations	<b>1</b> d	6,335,190					
పై :ౖ	e Government grants (contributions)	1e	141,998					
Sin	<b>f</b> All other contributions, gifts, grants, and similar amounts not included							
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions included	1f	34,528,860					
Contr and (	in lines 1a-1f \$		<u>59,474</u>					
ج ت	h Total.Add lines 1a-1f	• •	<del></del>	51,113,230				<b>T</b>
H.e			Business		04.300	0.4	200	
۴۸۶	2a PROGRAM SERVICES b rent reimbursement			900099 531120 1,	84,380 807,956	1,807,9	+	0 0
Program Service Revenue	- REINI REIMBURSEMENT			331120 1,	.007,550	1,007,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ır vic	с —	_						
35	d ————————————————————————————————————	_						
gran	<b>f</b> All other program service revenue							
Ρō	<b>gTotal.</b> Add lines 2a-2f	ı	1,8	92,336				
	3 Investment income (including divide	ends, i	nterest, and other	l				
	sımılar amounts)		<b>&gt;</b>	1,130,6	_		6,607	1,124,044
	<b>4</b> Income from investment of tax-exe <b>5</b> Royalties				0			
	(ı) Real		▶					
	6a Gross rents		(,					
	<b>b</b> Less rental expenses							
	D Less Terrial expenses							
	c Rental income or (loss)	0	0					
	<b>d</b> Net rental income or (loss)			ļ	0			
	(i) Securit		(II) Other			+		
	7a Gross amount							
	assets other	92,538						
	than inventory							
		91,995						
	sales expenses  C Gain or (loss)  2,5	00,543						
	d Net gain or (loss)	•	•	] 2,500,54	43			2,500,543
	8a Gross income from fundraising eve							
ne	(not including \$10,000,316 contributions reported on line 1c)	of						
Ver	See Part IV, line 18	а	1,098,423					
Other Revenue	<b>b</b> Less direct expenses	b	1,139,810					
her	c Net income or (loss) from fundrais	-	ents 🕨	-41,38	37			-41,387
Off	<b>9a</b> Gross income from gaming activities See Part IV, line 19	es						
		а	0					
	<b>b</b> Less direct expenses	b	0					
	c Net income or (loss) from gaming	activit	ies 🕨	г	0	-		
	<b>10a</b> Gross sales of inventory, less returns and allowances							
		а	0					
	<b>b</b> Less cost of goods sold	b	0					
	C Net income or (loss) from sales of Miscellaneous Revenue	ınvent	ory ▶ Business Code		0			
	11a <sub>REIMBURSEMENTS</sub>		900099	39,34	43	39,343	0	
	REIMBURGEMENTS					-,	v	
	b All other revenue		900099	41,5	72	0	0	41,572
	- All other revenue		300033				Ü	1,372
	с							
	d All other revenue				-			
	e Total. Add lines 11a-11d	.	<u> </u>		+			
		•		80,93	15			
	12 Total revenue. See Instructions	• •	• • • •	56,676,28	38	1,931,679	6,607	
								Form <b>990</b> (2017

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			П
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	22,571,816	22,571,816	3 '	
2 Grants and other assistance to domestic individuals See Part IV, line 22	0	0		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	288,112	288,112		
4 Benefits paid to or for members	0	0		
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,567,455	1,082,993	242,231	242,231
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
<b>7</b> Other salaries and wages	12,771,312	7,005,300	782,038	4,983,974
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,795,217	798,643	174,357	822,217
9 Other employee benefits	1,013,309	469,074	86,529	457,706
<b>10</b> Payroll taxes	1,083,383	617,129	65,665	400,589
11 Fees for services (non-employees)				
a Management	0	0	0	0
<b>b</b> Legal	37,442	0	37,442	0
c Accounting	84,610	0	84,610	0
<b>d</b> Lobbying	63,000	63,000	0	0
e Professional fundraising services See Part IV, line 17	36,156			36,156
f Investment management fees	261,322	0	261,322	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,688,060	1,261,981	183,845	242,234
12 Advertising and promotion	825,474	552,638	13,090	259,746
13 Office expenses	358,264	154,334	81,841	122,089
<b>14</b> Information technology	443,744	149,499	90,309	203,936
15 Royalties	0	0	0	0
<b>16</b> Occupancy	2,619,371	1,817,311	591,479	210,581
<b>17</b> Travel	353,124	268,699	66,236	18,189
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials •	0	0	0	0
<b>19</b> Conferences, conventions, and meetings	264,017	175,728	76,292	11,997
<b>20</b> Interest	0	0	0	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	1,621,191	1,076,843	431,239	113,109
23 Insurance	578,650	115,730	243,033	219,887
24 Other expenses Itemize expenses not covered above (List				

17,559

162,317

26,201

194,920

38,869,827

39,406

9,495

86,873

366,096

4,013,428

126,296

1,045,713

129,662

706,658

52,333,358

69,331

873,901

16,588

145,642

9,450,103

Form **990** (2017)

miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

expenses on Schedule O )

**b** SPECIAL EVENT EXPENSE

c TEMPORARY LABOR

d OTHER EXPENSES

e All other expenses

a EQUIPMENT REPAIRS & MAINT

Page **11** 

12,894,290

91.749.556

19.544.665

162,580,919

3,818,801

11,960,062

18.648.772

250,000

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0

0

0

1.168.629

35,846,264

91.927.317

26,832,586

7.974.752

126,734,655

162.580.919

Form **990** (2017)

180.141

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

b Less accumulated depreciation

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Investments—publicly traded securities .

Intangible assets . . . . .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Investments—other securities See Part IV, line 11 .

**Total assets.**Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments-program-related See Part IV, line 11

		Beginning of year		End of year
1	Cash-non-interest-bearing	27,136,578	1	26,361,954
2	Savings and temporary cash investments	8,169,355	2	0
3	Pledges and grants receivable, net	8.384.569	3	10.684.602

24.465.082

14,172,628 **10**c

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27

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31

32

33

34

0 22

0

31.861.850

39.761.256

17.112.382

147,474,863

3,399,529

12,431,469

16.423.218

1.661.666

34,165,882

87.393.229

20,602,410

5.313.342

113,308,981

147,474,863

250,000

<b>4</b> Ac <b>5</b> Lo	edges and grants receivable, net	8,384,569	3	10,684,602
<b>5</b> Lo.	pans and other receivables from current and former officers, directors, sustees, key employees, and highest compensated employees. Complete Part	0	4	0
	ustees, key employees, and highest compensated employees. Complete Part	0		
II			5	0
se co vo	pans and other receivables from other disqualified persons (as defined under ection 4958(f)(1)), persons described in section 4958(c)(3)(B), and ontributing employers and sponsoring organizations of section 501(c)(9) oluntary employees' beneficiary organizations (see instructions) Complete art II of Schedule L	0	6	0
7 No	otes and loans receivable, net	573,215	7	642,833
Assets a low	oventories for sale or use	0	8	0
9 Pre	repaid expenses and deferred charges	303,030	9	522,878
	and, buildings, and equipment cost or other asis Complete Part VI of Schedule D 10a 37,359,372	2		

10b

Liabilities 23 24 25 26 Fund Balances 27 28 29 Assets or

30

31

32

33

34

Net

11

12

13

14

15

16

17

18

19

20

21

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Page **12** 

9.082.744

126,734,655

No

Νo

No

Form 990 (2017)

Yes

Yes

Yes

2a

2b

2c

3a

3b

7

8

9

10

0

0

0

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 5 5 6

Other changes in net assets or fund balances (explain in Schedule O) . . . . . . . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Form 990 (2017)

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

**Financial Statements and Reporting** 

## Additional Data

**Software Version:** 

**EIN:** 95-1643388 Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Software ID:

Form 990 (2017)

Form 990, Part III, Line 4a:

SEE SCHEDULE O

Form 990, Part III, Line 4b: SEE SCHEDULE O

Form 990, Part III, Line 4c: SEE SCHEDULE O

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

JESSE GABRIEL

DIRECTOR

LYNN BIDER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

LEON JANKS

ALAN ROSEN

JESSE SHARF

,	ally flours	Lanu	a uii	ecto	יון / וו	ustee)		Organization	/W 3/1000	I toll tile
	for related organizations below dotted line)	Individual trustee or director	Hastitutional Trustee	101	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JULIE PLATT DIRECTOR/CHAIRMAN	1 0	x		х				0	0	0
FRANK MAAS DIRECTOR/VICE CHAIRMAN	1 0	x		x				0	0	0
ALBERT PRAW DIRECTOR/VICE CHAIRMAN	1 0	x		х				0	0	0
ROCHELLE COHEN	1 0	1 1		х			П	0	0	0

DIRECTOR/VICE CHAIRMAN	0 0					
ALBERT PRAW	1 0					
DIRECTOR/VICE CHAIRMAN	0 0	×	×		U	
ROCHELLE COHEN	1 0					
DIRECTOR/VICE CHAIRMAN	0 0	×	×		0	
HEIDI MONKARSH	1 0	×	×		0	
DIRECTOR/SECRETARY	0.0	^	^			

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

DIRECTOR

LISA HESS

DIRECTOR

DIRECTOR

DIRECTOR

KEN KAHAN

DIRECTOR

DIRECTOR

KEN PRESSBERG

ANDREW ALTSHULE

JONATHAN ANSCHELL

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	any nours	anu	a uii	ectt	ון או	ustee)		Organization	organizations	Irom the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JILL NAMM	1 0									
DIRECTOR	0 0	×						0	0	0
TERRI SMOOKE	1 0	l								
DIRECTOR	0 0	×						l "	0	0
DEBI GRABOFF	1 0	×						0	0	0
DIRECTOR	0 0	''						Ŭ	0	
KATHY GUCCIONE	1 0									

DEBI GRABOFF	1 0	×						n	
DIRECTOR	0 0	^						Ŭ	
KATHY GUCCIONE	1 0	×						n	
DIRECTOR	0 0							Ŭ	
GEORGE HESS	1 0								
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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation from the

and Independent Contractors

NANCY S COHEN

JONATHAN COOKLER

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JOSH FEFFER

ARI EISENBERG

SHAWN EVENHAIM

	any hours	and	a dir	ecto	r/tr	ustee)	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	ee voldme Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DEBBIE ATTANASIO DIRECTOR	1 0	×						0	0	0
DEREK BROWN DIRECTOR	10	х						0	0	0
LYNETTE BROWN	1 0									

DEILER BROWN		l x			n	0	
DIRECTOR	0 0				3	0	
LYNETTE BROWN DIRECTOR	1 0	x			0	0	
ANDREA CAYTON	1 0	х			0	0	
DIRECTOR	0 0						
JERRY COBEN	1 0	×			n	0	
DIRECTOR	0.0	''			•	Ĭ	

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

	any hours	and	a dır	ecto	or/tr	ustee)	,	organization	organizations	from the organization and	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee			(W- 2/1099- MISC)	related organizations	
CECE FEILER DIRECTOR	10	×						0	0	0	
LARRY FREEMAN DIRECTOR	1 0	×						0	0	0	
RODNEY FREEMAN	1 0	х						0	0	0	

DIRECTOR	0 0						
LARRY FREEMAN	1 0						
DIRECTOR	0 0	×				0	
RODNEY FREEMAN	1 0	×				0	
DIRECTOR	0 0	^				9	
ABNER GOLDSTINE	1 0						
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and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

MARK LAINER

JONATHAN LITTMAN

ADA HORWICH ........

SHARON JANKS

STEVEN GORDON

DANIEL GRYCZMAN

.......

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

and Independent Contractors

MARC ROHATINER

RICHARD V SANDLER

MOSHE SASSOVER

GLENN SONNENBERG

MICHAEL TUCHIN

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DANA SAYLES

......

	any hours	for malabad							organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
VIRGINIA MAAS	1 0	×						0	0	0	
DIRECTOR	0 0										
HAROLD MASOR	1 0	х						0	0	0	
DIRECTOR	0 0										
STEVEN NICHOLS	1 0	×						0	0	0	
DIRECTOR	0.0								U	-	

HAROLD MASOR		l x			n	
DIRECTOR	0 0					Ĭ
STEVEN NICHOLS	1 0					
		X			0	0
DIRECTOR	0.0					
LAWRENCE POST	1 0					
		X			0	0
DIRECTOR	0.0					

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer from the week (list from related compensation any hours and a director/trustee) organization organizations from the

	for related							organization	organizations	organization and	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
MARK WEINSTEIN	1 0	х						0	0	0	
DIRECTOR	0 0										
BRIAN WEISBERG DIRECTOR	1 0	х						0	0	0	
ORNA WOLENS DIRECTOR	1 0	Х						0	0	0	
MICHAEL ZIERING DIRECTOR	1 0	×						0	0	0	

0

563,440

309,554

0

61,388

34,541

0

BIRECTOR	0 0				
ORNA WOLENS	1 0	>			
DIRECTOR	0 0	<			
MICHAEL ZIERING	1 0	×			
DIRECTOR	0 0	ζ.			
JEANNE MARKS	1 0				

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and Independent Contractors

DIRECTOR

DIRECTOR

LES BIDER

...... DIRECTOR

DIRECTOR

JONATHAN KLEIN

ALEX WEINGARTEN

JAY SANDERSON

CEO/PRESIDENT

IVAN WOLKIND

CFO/COO

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

EVP CHIEF PROGRAM OFFICER

ASSOC CHIEF DEVLPMT OFFICER

SR VP CARING FOR JEWS IN NEED

CATHERINE SCHNEIDER

LORI KLEIN

								(1)   2 (4 0000	44.000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
CAROL KORANSKY EVP DIRECTOR VALLEY ALLIANCE	38 0				×			230,421	0	34,980	
ANDREW CUSHNIR  EVP CHIEF DEVELOPMENT OFFICER	38 0				×			289,600	0	43,528	
DENISE OSSO	38 0										

ANDREW CUSHNIR	38 0						
EVP CHIEF DEVELOPMENT OFFICER	0 0		X		289,600	0	
DENISE OSSO	38 0			×	177,646	0	
CHIEF CREATIVE DIRECTOR	0 0			^	177,040	0	
	38.0						

DENISE OSSO	38 0						_	
		l		X		177,646	(	1
CHIEF CREATIVE DIRECTOR	0 0							
CYNTHIA AYALA	38 0							
		l		v		181,038	ا م	1
SVP ADMINISTRATION & HR		l		_ ^		101,030	i "	1

......

0 0 38 0

0 0

		l		I	l x l		177.646	ı 0'	
CHIEF CREATIVE DIRECTOR	0 0				,,,		277,010		
CYNTHIA AYALA	38 0				>		181,038	0	
SVP ADMINISTRATION & HR	0 0				^		181,038		

CHIEF CREATIVE DIRECTOR	0.0						
CYNTHIA AYALA	38 0						
SVP ADMINISTRATION & HR				X	181,038	0	60,085
SVF ADMINISTRATION & TIK	0 0						
REBECCA SOBELMAN-STERN	38 0						

216,971

190,531

171,303

92,103

13,450

9,583

11,273

efil	e GR/	APHIC prii	<u>nt - DO N</u> O	T PROCESS	As Filed Data -			DLN: 9:	3493319080948
(For	m 99	ULE A 0 or	Con		Charity Statu	ion 501(c)(3) d	organization o	ort	2017
990I	EZ)				4947(a)(1) nonexe  ▶ Attach to Form				2017
		the Treasury	▶ Inf	ormation abou	ıt Schedule A (Form			ictions is at	Open to Public Inspection
Nam	e of th	ne organiza	<b>tion</b> CIL OF GREATE	RIA				Employer identific	ation number
								95-1643388	
	rt I				<b>us</b> (All organization : it is  (For lines 1 thro			See instructions.	
1	n ganiz		•		`	•	,	/A\/:\	
_		·		•	sociation of churches				
2	Ш				1)(A)(ii). (Attach Sch	•	• •		
3		·	•	·	vice organization desc			•	
4		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state							
5		(b)(1)(A)	( <b>iv).</b> (Comple	ete Part II )	t of a college or unive				ped in <b>section 170</b>
6		•	·	_	governmental unit de				
7	$\checkmark$	section 17	0(b)(1)(A)	( <b>vi).</b> (Complete				init or from the genera	al public described in
8		A communi	ty trust desc	nbed in <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le implete Part III )	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ition organize	ed and operated	dexclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a	
a		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting on t of the sup	rganızatıon sup portıng organıza	ervised or controlled i				
c		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrated The organization	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	t IV, Sections A and ved a written determin	nation from the II		pe I, Type II, Type II	functionally
f	Enter			ion-functionally Lorganizations	integrated supporting	organizacion			
g				_	ipported organization(	5)			
		lame of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orga	(iv) Is the organization listed in your governing document?		(vi) Amount of other support (see instructions)
						Yes	No		
Tota	l					1	ĺ		I

organization

instructions

supported organization

ightharpoons

▶□

Schedule A (Form 990 or 990-EZ) 2017

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 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.)

S	Section A. Public Support									
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2	2017	(f) Total		
1	(or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not	44,654,777	47,281,505	47,593,509	44,796,587		1,113,231	235,439,609		
2	include any "unusual grant ")  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							ţ		
4	<b>Total.</b> Add lines 1 through 3	44,654,777	47,281,505	47,593,509	44,796,587	5	1,113,231	235,439,609		
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)							1,901,230		
6	<b>Public support.</b> Subtract line 5 from line 4							233,538,379		
5	Section B. Total Support									
	Calendar year	(a)2013	<b>(b)</b> 2014	(c)2015	(d)2016	(e)2	017	(f)Total		
_	(or fiscal year beginning in) ▶	` '	` '		` '					
7 8	Amounts from line 4 Gross income from interest,	44,654,777	47,281,505	47,593,509	44,796,587	5	1,113,231	235,439,609		
•	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,878,837	2,150,936	1,212,845	1,206,790		1,130,651	7,580,05		
9	Net income from unrelated business activities, whether or not the business is regularly carried on			7,767	128,515	82,959		82,959		219,24
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							(		
11	Total support. Add lines 7 through							243,238,909		
12	10 Gross receipts from related activities,	etc (see instruction	ns)			12		9,741,90		
	First five years. If the Form 990 is for			rd fourth or fifth	tax vear as a sect		(c)(3) orga			
	check this box and <b>stop here</b>						_	inzacion,		
5	Section C. Computation of Public									
14				olumn (f))		14		96 012 %		
	Public support percentage for 2016 Sc			. , ,		15		94 337 %		
	33 1/3% support test—2017. If the			n line 13, and line	e 14 is 33 1/3% or		heck this b			
ŀ	and stop here. The organization quali 33 1/3% support test—2016. If th				nd line 15 is 33 1/	3% <b>or</b> m	nore, check	<b>▶</b> ✓		
•	box and <b>stop here</b> . The organization	-		·	,		,	▶ □		

17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

h 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Р	art III Support Schedule fo					_	_
	(Complete only if you o						er Part II. If
	the organization fails to ection A. Public Support	o quality under	the tests listed	pelow, please co	ompiete Part II.	)	
	Calendar year						(0
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
5	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 Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b <b>Public support.</b> (Subtract line 7c						
8	from line 6 )						
Se	ection B. Total Support		l	L		l	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(0) 2013	(d) 2010	(e) 2017	(I) Iotai
9							
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						
12	regularly carried on Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI )						
13							
14	11, and 12) First five years. If the Form 990 is for	r the organization	ı n's fırst. second. tl	ı nırd. fourth, or fıft	h tax vear as a se	ction 501(c)(3) o	rganization.
	check this box and <b>stop here</b>		,	,,,	<b>,</b>		▶ □
Se	ection C. Computation of Public	Support Perce	entage				
15	Public support percentage for 2017 (li			column (f))		15	
16	Public support percentage from 2016	Schedule A, Part I	II, line 15			16	
	ection D. Computation of Invest	ment Income	Percentage			<u> </u>	
17	Investment income percentage for 20			line 13, column (f	f))	17	
18	Investment income percentage from 2	<b>2016</b> Schedule A,	Part III, line 17			18	
	331/3% support tests—2017. If the			on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶□
	33 1/3% support tests—2016. If the	•					· —
,	not more than 33 1/3%, check this bo	-			*		▶□
20	Private foundation. If the organizati	<del>-</del>	<del>-</del>		· · · · · -		▶□
							. —

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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 <b>Part VI</b> when and how the organization made the			
	determination	3b		

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 <b>Part VI</b> when and how the organization made the determination				
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in <b>Part VI</b> 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				

				3.
С	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\rightarrow$	
	supervised by or in connection with its supported organizations	4b		
С	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 <b>Part VI</b> 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	4c	$\overline{}$	
	to the left supported organization was used exclusively to seed the 150(e)(e) parposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b			
С	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 <b>Part VI</b> 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 <b>Part VI</b> , 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)				

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 <b>Part VI.</b>		
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)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)		•	-9
	·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	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		
	ection B. Type I Supporting Organizations			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
-	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations		l	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
S	ection 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 instruction of the organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	·	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	<b>2</b> a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	3a		
	<b>b</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 <b>Part VI.</b> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

8	Distributions to attentive supported organizations to wh details in <b>Part VI</b> ) See instructions	sive (provide					
9	9 Distributable amount for 2017 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
	Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017					
1	1 Distributable amount for 2017 from Section C, line 6						

details in <b>Part VI</b> ) See instructions					
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017			
	(i)	(i) (ii) Underdistributions			

9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line     6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
c From 2014			
d From 2015			

e From 2016. . . . . . f Total of lines 3a through e

**d** Excess from 2016. . . . e Excess from 2017. . . . .

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c Remainder Subtract lines 4a and 4b from 4		
<b>5</b> Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
<b>7 Excess distributions carryover to 2018.</b> Add lines 3j and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
<b>7 Excess distributions carryover to 2018.</b> Add lines 3 <sub>1</sub> and 4c		
8 Breakdown of line 7		
a Excess from 2013		
<b>b</b> Excess from 2014		
c Excess from 2015		

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

### **Additional Data**

#### Software ID: Software Version:

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Schedule A (Form 990 or 990-EZ) 2017 Page 8 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, 3h, 3c, 4h, 4c, 5a, 6, 9a, 9h, 9c, 11a, 11h, and 11c, Part IV, Section B, lines 1, and 2, Part IV, Section C, line 1

Facts And Circumstances Test			
	instructions)		
	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		
	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 A, lines 1, 2, 3b, 3c, 4b, 4c, 3a, 3b, 3c, 11a, 11b, and 11c, Fart IV, Section b, lines 1 and 2, Fart IV, Section C, line 1,		

**SCHEDULE C** 

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493319080948

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

S S S f the S f the Pro:	ection 501(c)(3) organizations Con Section 501(c) (other than section 5 Section 527 organizations Complet corganization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 99 thave filed Form 5768 (election under so thave NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	Part I-C I-A and C below 90-EZ, Part VI, Imection 501(h)) Co der section 501(h)	Do not complete e 47 (Lobbying mplete Part II-A )) Complete Part	Part I-B  Activitie Do not c	es), then complete Part I	I-B Part II-A		
Nar	me of the organization	·		Emple	oyer ide	ntification nu	ımber		
JEW	ISH FEDERATION COUNCIL OF GREATER	. LA		95-16	43388				
Par	t I-A Complete if the organ	nization is exempt under section	n 501(c) or is			ization.			
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political cam	paign activities in	Part IV (see inst	tructions	for definition o	of		
2	Political campaign activity expend	itures (see instructions)			<b>&gt;</b>	\$			
3	Volunteer hours for political camp	aign activities (see instructions)							
Par	t I-B Complete if the orga	nization is exempt under section	n 501(c)(3).						
1	Enter the amount of any excise ta	ex incurred by the organization under se	ction 4955		<b>&gt;</b>	\$			
2	Enter the amount of any excise ta	ix incurred by organization managers ur	ider section 4955		<b>&gt;</b>	\$			
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	his year?			☐ Yes	□ No		
4a	Was a correction made?					☐ Yes	□ No		
b	If "Yes," describe in Part IV								
Par		nization is exempt under section			1(c)(3	).			
1	·	ed by the filing organization for section	•		<b>&gt;</b>	\$			
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other or	ganizations for se	ction 527 exemp	rt ▶	\$			
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	lıne 17b	<b>&gt;</b>	\$			
4	Did the filing organization file For	m 1120-POL for this year?				☐ Yes	□ No		
5									
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiz funds If none -0-	ation's	contributio and prof directly de separate organizatio	it of political ins received mptly and livered to a political on If none, r -0-		
1									
2									
3									
1									
5									
5									
		1	1						

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

(b)

(a)

activity Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? No Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? No Media advertisements? No c 0 Mailings to members, legislators, or the public? Nο 0 Publications, or published or broadcast statements? Nο e 0 Yes Grants to other organizations for lobbying purposes? 63.000 No q Direct contact with legislators, their staffs, government officials, or a legislative body? 0 Nο h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 0 Other activities? Νo Total Add lines 1c through 1i 63,000 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Νo If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year c 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

5 Taxable amount of lobbying and political expenditures (see instructions)

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference Explanation

SCHEDULE C, PART II-B, LINE 1F

LOBBYING EXPENSE ALLOCATIONS THE JEWISH PUBLIC AFFAIRS COMMITTEE OF CALIFORNIA (JPAC) IS THE LARGEST SINGLE STATE COALITION OF JEWISH ORGANIZATIONS IN THE NATION  $\,$  JPAC IS COMPRISED OF JEWISH FEDERATIONS, JEWISH COMMUNITY RELATIONS COMMITTEES, AND OTHER CALIFORNIA BASED JEWISH ORGANIZATIONS JPAC TAKES POSITIONS ON LEGISLATION DEALING WITH ISSUES IMPORTANT TO THE JEWISH COMMUNITY, SUCH AS CIVIL RIGHTS, SEPARATION OF CHURCH AND STATE, SOCIAL SERVICE DELIVERY, AND PUBLIC EDUCATION JPAC ALSO ADVOCATES ON THE FULL RANGE OF JEWISH COMMUNITY CONCERNS, INCLUDING SUPPORT ON BEHALF OF JEWISH SOCIAL SERVICE PROVIDER AGENCIES THAT SERVE THE POPULATION AT LARGE JPAC SERVES AS A RESOURCE TO LEGISLATORS ON

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

## **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.

DLN: 93493319080948 OMB No 1545-0047

Inspection

(Form 990)

Open to Public ▶ Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. 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) Aggregate value of grants from (during year) Aggregate value at end of year 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 conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, 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 tax year 🕨 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 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? 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 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 (ii) Assets included in Form 990, Part X 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

Suding the organization suggestion, accession, and other records, check any of the following that are a significant use of its collection remotives (collection)   Collection   Collectio	Sche	dule D (Form 990) 2017							Page <b>2</b>
Beginning of year balance   Part XIII   Canonical to expandation in Part XIII   Part All   Canonical to expandation amount on Form 990, Part X, line 21, for escrew or custod all account liability   Yes   No	Par	t III Organizations Maintaining Coll	ections of Art, I	Historio	al Trea	sures, or O	ther Similar A	Assets (cor	ntinued)
Scholary research   e   Other	3		, and other records	, check a	ny of the	following that	are a significant	: use of its c	ollection
Scholarly research   Descriptions   Preservation for future generations	а	Public exhibition		d	☐ Loa	n or exchang	e programs		
Provide a decomption of the organization's collections and explain how they further the organization's exempt purpose in Park XIII  Park XIII	b	Scholarly research		e	☐ Oth	ner			
Part XIII	c	Preservation for future generations							
No   No   No   No   No   No   No   No	4		ections and explain	how the	y further t	he organization	on's exempt purp	oose in	
Segment   Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, line 21. Segment and a pagent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part IV; line 10   Yes   No	5							☐ Yes	□ No
Part   Part	Pa	Complete if the organization answ		rm 990,	Part IV,	line 9, or re	eported an amo	ount on For	rm 990, Part
Seginning balance   1d	1a		n or other intermed	diary for	contribution	ons or other a	ssets not	☐ Yes	☑ No
Additions during the year   1	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able			Amount	
Distributions during the year   1e	С	Beginning balance				1	с		
Part   Part	d	Additions during the year				1	d		
Part   Part	е	Distributions during the year				1	e		
Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Part V   Endowment Funds and solves   Color years back   Color ye	f	Ending balance				1	f		
Part   V   Endowment Funds. Complete if the organization answered "Yes" or Form 990, Part IV, line 10.   Calcument year   (b)Prior year   (c)Two years back   (d)Three years back   (e)Four years years	<b>2</b> a	Did the organization include an amount on For	rm 990, Part X, line	21, for e	scrow or	custodial acco	ount liability?	<b>☑</b> Yes	
	b								
1a Beginning of year balance         80,192,285         80,783,874         83,266,620         81,580,211         74,134,717           b Contributions         6,423,887         2,943,181         5,597,769         3,707,776         2,089,662           c Not investment earnings, gains, and losses         12,617,998         4,124,065         -1,653,857         2,335,782         9,346,757           d Grants or scholarships         4,209,520         7,381,756         6,149,847         4,101,572         3,764,817           e Other expenditures for facilities and programs         2,261,922         2,770,79         276,811         255,887         222,098           g End of year balance         24,209,520         7,381,756         6,149,847         4,101,572         3,764,817           p Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as         83,266,620         81,580,221           p Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as         83,266,620         81,580,221           p Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as         83,266,620         83,580,221           p Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as         83,266,620         83,580,221           p Permanent endowment P as 42,09, and 2 should equal	Pa	rt V Endowment Funds. Complete if					<u> </u>		
b Contributions	4.	Danis and the same							
to Net investment earnings, gains, and losses d Grants or scholarships						<u> </u>			
d Grants or scholarships		•	, ,			<u>'</u>	,		
## A A CONSTRUCTION OF THE PRINCE OF TABLES O		- · - ·	12,017,998		4,124,003	-1,0	33,637	2,333,762	9,340,737
Addministrative expenses		·							
## Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  ## Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  ## Board designated or quasi-endowment ▶ 85 110 %  ## Permanent endowment ▶ 8 420 %  ## The percentages on lines 2a, 2b, and 2c should equal 100%  ## Are there endowment funds not in the possession of the organization that are held and administered for the organization by  ## (ii) unrelated organizations	е	· '	4,209,520					4,101,572	3,764,817
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  a Board designated or quasi-endowment ▶ 85 110 %  b Permanent endowment ▶ 8 420 %  c Temporarily restricted endowment ▶ 6 470 %  The percentages on lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	f	Administrative expenses	261,322		277,079	2	76,811	255,587	226,098
Boald designated or quasi-endowment ▶ 8 5 110 %    Column	g	End of year balance	94,763,328		80,192,285	80,7	83,874 8	3,266,620	81,580,221
Permanent endowment   8 420 %	2	Provide the estimated percentage of the curre	nt year end balance	(line 1g	, column i	(a)) held as			
Temporarily restricted endowment  6 470 % The percentages on lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	а	Board designated or quasi-endowment 🕨 💢	85 110 %						
The percentages on lines 2a, 2b, and 2c should equal 100%   Are there endowment funds not in the possession of the organization that are held and administered for the organization by   Yes   No   No   No   No   No   No   No   N	b	Permanent endowment ► 8 420 %							
A contact   A co	С	Temporarily restricted endowment ► 6 47	70 %						
No   No   No   No   No   No   No   No		The percentages on lines 2a, 2b, and 2c shoul	d equal 100%						
3a(i)   Yes	3a		sion of the organiza	tion that	are held a	and administe	red for the		
Cii) related organizations   Cii) related organizations   Cii)   Tess" on 3a(ii)   Tess" on 5a(ii)   Tess" on 5a(iii)   Tess" on 5a(iii)   Tess" on 5a(ii)		- ·						- C	
If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?		• • • • • • • • • • • • • • • • • • • •							<del>`</del>
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describtion of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value  1a Land (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value  b Buildings (a) 2,463,991  b Buildings (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value  c Leasehold improvements  d Equipment (a) 3,780,060  Control of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value  2,463,991  2,463,991  3,780,060  3,555,069  3,555,069  3,735,930  4,835,941  4,835,954  4,835,954	h	• •	clisted as required	on Scher	ula P2			<u>-</u>	<del></del>
Land, Buildings, and Equipment.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.     Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation   (d) Book value			•			• • •			1 163
Complete if the organization answered "Yes" on Form 990, Part IV, Ine 11a. See Form 990, Part X, Inne 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value  2,463,991  Buildings	_								
1a Land     2,463,991     2,463,991       b Buildings     28,543,437     19,074,059     9,469,378       c Leasehold improvements     3,780,060     3,555,069     224,991       e Other     2,571,884     1,835,954     735,930				rm 990,	Part IV,	line 11a. Se	ee Form 990, F	art X, line	10.
b Buildings       28,543,437       19,074,059       9,469,378         c Leasehold improvements				or other l	oasis (other	(c) Accumu	ulated depreciation	(d)	Book value
b Buildings       28,543,437       19,074,059       9,469,378         c Leasehold improvements       State of the control o	1a	Land			2,463,99	91			2,463,991
c Leasehold improvements         Section 1           d Equipment         3,780,060         3,555,069         224,991           e Other         2,571,884         1,835,954         735,930					28,543,43	37	19,074,059	)	9,469,378
d Equipment     3,780,060     3,555,069     224,991       e Other     2,571,884     1,835,954     735,930								+	
e Other		, <u> </u>			3,780,06	50	3,555,069	)	224,991
		· ·			2,571,88	34	1,835,954	1	
			jual Form 990, Part	X, colum	ın (B), lını	= 10(c) ) .	. •	1	12,894,290

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	ie organization ansv	vered "Yes" on Form 9	990, Part IV, line 11b.
(a) Description of security or category	(b) Book value		nod of valuation
(including name of security)  (1) Financial derivatives		Cost of end-	of-year market value
(2) Closely-held equity interests			
(3) Other (A) JEWISH COMMUNITY FOUNDATION	91,749,556		F
(B) COMMON INVESTMENT POOL	0		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	91,749,556		
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on F	orm 990, Part IV, lı	ne 11c. See Form 990	), Part X, line 13.
(a) Description of investment	(b) Book value	(c) Meth	nod of valuation
(1)		Cost or end-	of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	•		
Part IX Other Assets. Complete if the organization answered  (a) Description	'Yes' on Form 990, Pa	art IV, line 11d See Form	1 990, Part X, line 15 (b) Book value
(1) JIM JOSEPH FUND HSAI			18,648,772
(2) DUE FROM BROKER (3) CSV LIFE INSURANCE			484,295 250,345
(4) DEFERRED COMPENSATION 457 (B)			146,214
(5) DONATED REAL ESTATE			15,039
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			<b>▶</b> 19,544,665
Part X Other Liabilities. Complete if the organization a	nswered 'Yes' on Fo	orm 990, Part IV, line	11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	(b) B	look value	_
(1) Federal income taxes		0	
DB PENSION PLAN PAYABLE		947,440	
DEFERRED COMPENSATION 457 (B) PLAN		146,214	
OTHER LIABILITIES (4)		74,975	
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  2. Liability for uncertain tax positions In Part XIII, provide the text of	►   f the footnote to the o	1,168,629	tements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 7			_

Part XI

Part XII

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

2

а

b

Schedule D (Form 990) 2017

Page 4

9,082,743

54,636,444

2,039,844

56,676,288

50,293,516

50,293,516

2,039,842

52.333.358

Schedule D (Form 990) 2017

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Investment expenses not included on Form 990, Part VIII, line 7b . 

b

Add lines **4a** and **4b** . . . . . . . . c

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments . . . .

5

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . . .

**Supplemental Information** 

Add lines 2a through 2d . . . . . . . . .

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 . .

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

4a 4b

> 2a 2b

2c

2d

4a

4b

Explanation

2a

2b

261,322 1.778.522

9,082,743

4c

2e

3

4c

5

261,322

1,778,520

5

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

Page <b>5</b>		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

## Additional Data

Software ID: Software Version:

**EIN:** 95-1643388

ROM THE HIGH SCHOOLS FOR INVESTING IN THE COMMON INVESTMENT POOL MANAGED BY THE

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Supplemental Information
Return Reference

Explanation

SCHEDULE D, PART IV, LINE 2B

THE JEWISH FEDERATION COUNCIL OF GREATER LA PARTNERED WITH THE JEWISH COMMUNITY FOUNDATION
("FOUNDATION"), BUILDERS OF JEWISH EDUCATION ("BJE"), AND FIVE BJE AFFILIATED JEWISH HIGH
SCHOOLS ("HIGH SCHOOLS") PARTICIPATED IN THE JIM JOSEPH FOUNDATION HIGH SCHOOL AFFORDABIL
ITY INITIATIVE THE INITIATIVE ASSISTS THE HIGH SCHOOLS IN RAISING ENDOWMENT DOLLARS WHICH
WILL BUILD ONGOING CAPACITY TO SUPPORT JEWISH HIGH SCHOOL EDUCATION THE FEDERATION ACTS
AS INTERMEDIARY BETWEEN THE BJE AND THE FOUNDATION BY TRANSFERRING FUNDS RECEIVED BY BJE F

FOUNDATION

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	INTENDED USE OF ENDOWMENT FUNDS THE BOARD DESIGNATED ENDOWMENT IS INTENDED TO PROVIDE ONGO ING SUPPORT FOR THE ORGANIZATION THROUGH AN ANNUAL DISTRIBUTION THE ANNUAL DISTRIBUTION I S BASED ON A SPENDING RATE OF 5% CALCULATED BASED ON THE TWELVE QUARTERS AVERAGE BALANCE A T SEPTEMBER 30TH ADDITIONALLY, THE BOARD DESIGNATED ENDOWMENT MAY BE USED TO SUPPORT SIGN IFICANT OPERATING OR PROGRAM INITIATIVES THAT EXCEED THE PROJECTED ANNUAL REVENUE AND EXPE NSE BUDGET DISTRIBUTIONS THAT EXCEED THE ANNUAL SPENDING RATE ARE APPROVED BY THE BOARD OTHER ENDOWMENT FUNDS ARE INTENDED TO A) MATCH AREA JEWISH DAY SCHOOLS SCHOLARSHIP DISTRIB UTIONS, B) PROVIDE FOR CAPITAL IMPROVEMENTS TO THE FEDERATION'S FACILITIES, C) MAINTAIN WO MENS' LION OF JUDAH GIFTS IN PERPETUITY AND SUPPORT WOMEN'S PHILANTHROPY, AND D) SUPPORT T HE FEDERATION'S ANNUAL CAMPAIGN IN PERPETUITY

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	FIN 48 (ASC740) FOOTNOTE THE FEDERATION IS EXEMPT FROM FEDERAL INCOME AND CALIFORNIA FRANC HISE TAXES UNDER SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE AND CORRESPONDING CALIFO RNIA REVENUE AND TAXATION CODE SECTIONS, RESPECTIVELY ADDITIONALLY, THE FEDERATION HAS DE TERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE REPORTING OR DISCLOSURE IN THE FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2017

Return Reference	Explanation
SCHEDULE D, PART XI, LINE 4B	EXPLANATION OF OTHER ADJUSTMENTS THE \$1,778,522 IS COMPRISED OF A RECLASS OF RENTAL REIMB URSEMENTS FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$1,807,955, A RECLASS OF CARS EXPENSES FROM EXPENSES REPORTED IN THE AUDITED F INANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF \$11,954, A RECLASS OF EVENT INCOME FROM EXPENSES REPORTED IN THE AUDITED FINANCIAL STATEMENT TO REVENUE REPORTED ON THE 990 OF

Supplemental Information

(\$41,387)

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART XII, LINE 4B	EXPLANATION OF OTHER ADJUSTMENTS THE \$1,778,520 IS COMPRISED OF A RECLASS OF RENTAL EXPEN SES FROM REVENUE REPORTED IN THE AUDITED FINANCIAL STATEMENT TO EXPENSES REPORTED ON THE 9 90 OF \$1,807,953, A RECLASS OF CARS EXPENSES FROM REVENUE REPORTED IN THE AUDITED FINANCIA L STATEMENT TO EXPENSE REPORTED ON THE 990 OF \$11,954, AND A RECLASS OF EVENT LOSS FROM RE VENUE REPORTED IN THE AUDITED FINANCIAL STATEMENT TO EXPENSES REPORTED ON THE 990 OF (\$41, 387)

efile GRAPHIC prin	t - DO NOT I	PROCESS A	s Filed Data	•		DLN:	93493319080948	
SCHEDULE F State		ement of A	Activities (	Outside the Uni	ited Sta	ates	OMB No 1545-0047	
(Form 990)	► Compl	nplete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  ▶ Attach to Form 990.					2017	
Department of the Treasury Internal Revenue Service	► Informa	ition about Sched		and its instructions is at wi	vw.irs.gov/f	orm990.	Open to Public Inspection	
Name of the organization		A.T.E.D. I. A.			E	mployer iden	tification number	
JEWISH FEDERATION CO	UNCIL OF GRE	ATER LA			9	5-1643388		
	<b>Information</b> Part IV, line		Outside the U	<b>Jnited States.</b> Comple	te if the o	rganızatıon a	nswered "Yes" to	
_	the grantees'	eligibility for the		substantiate the amount stance, and the selection	_		☐ Yes ☐ No	
2 For grantmaker outside the United		Part V the orga	nızatıon's proce	dures for monitoring the	use of its	grants and otl	her assistance	
3 Activites per Regio	n (The followir	ng Part I, line 3 t	able can be dupli	cated if additional space is	needed )			
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program se specii	y listed in (d) is a ervice, describe fic type of s) in region	(f) Total expenditures for and investments in region	
( 1) See Add'l Data								
( 2)								
(3)								
(4)								
( 5)								
3a Sub-total b Total from continua Part I c Totals (add lines 3)		1	24				1,510,652 1,510,652	
C TOLAIS (AUG IIIIES 3	a anu ou)	<u> </u>		T.			1,310,632	

(4)

2 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 . . . . . . . . . . . . . .

Schedule F (Form 990) 2017 (4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14) (15) (16) (17) (18) Page **3** 

Schedule F (Form 990) 2017

Part IIII Grants and O	ther Assistance to	Individuals	Outside the Unite	ed States. Complete if	the organization an	swered "Yes" to Form 9	90, Part IV, line 16.	
Part III can be	Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
(1)								
( 2)								
(3)								

Sche	dule F (Form 990) 2017		Page <b>4</b>
Pai	t IV 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	<b>☑</b> 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, do not file with Form 990)	Yes	<b>☑</b> 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	<b>✓</b> 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	<b>☑</b> 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	<b>☑</b> 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, do not file with Form 990)	☐Yes	<b>✓</b> No
	Schedul	e F (Form 9	990) 2017

Schedule F (Form 990) 2017 Page 5 Part V **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). Return **Explanation** Reference SCHEDULE F. PROCEDURES FOR MONITORING USE OF GRANTS THE JEWISH FEDERATION OF LOS ANGELES' ISRAEL OFFICE. PART I. LINE 2 OVERSEES THE JEWISH FEDERATION'S POLICIES. PROGRAMS. ALLOCATIONS. AND INSTITUTIONAL & PART I, LINE RELATIONSHIPS IN ISRAEL SUPPORT FOR, AND THE RELATIONSHIPS WITH, THE PEOPLE OF ISRAEL ARE KEY 3. COLUMN E ASPECTS OF THE FEDERATION'S MISSION THE ISRAEL OFFICE PROVIDES COORDINATION FOR OVERSEAS VISITS

TO ISRAEL BY MISSIONS. INDIVIDUALS. FAMILIES. ELECTED OFFICIALS. INTER-ETHNIC AND INTER-RELIGIOUS LEADERS AND EDUCATORS. THE ISRAEL OFFICE REPRESENTS THE FEDERATION WITH THE JEWISH AGENCY FOR ISRAEL, THE JOINT DISTRIBUTION COMMITTEE, THE JEWISH FEDERATION OF NORTH AMERICA, UNITED ISRAEL APPEAL. ISRAEL OFFICES OF OTHER JEWISH FEDERATIONS. ISRAELI GOVERNMENT MINISTRIES. THE UNITED STATES EMBASSY, MUNICIPALITIES IN ISRAEL, ACADEMIC INSTITUTIONS, AND ISRAELI NON-GOVERNMENTAL ORGANIZATIONS EXPENDITURES FOR THE OFFICE IN ISRAEL AMOUNT TO \$384.319 EXPENDITURES RELATED TO OUR COMMUNITY MISSIONS TO ISRAEL AND ALL RELATED COSTS ARE ALSO ON THIS LINE AND AMOUNT TO \$838,221

Return Reference	Explanation
CHEDULE F, PART I, LINE 3, OLUMN F	ACCOUNTING METHOD THE AMOUNT OF EXPENDITURES WAS DETERMINED USING THE ACCRUAL METHOD OF ACCOUNTING

SC

Return Reference	Explanation
SCHEDULE F, PART II	IN ADDITION TO THE GRANTS REPORTED ON SCHEDULE F, PART II, THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501 (C) (3) DOMESTIC U S CHARITY IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSIDIARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501 (C) (3) ORGANIZATIONS EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULE F THE JFNA GRANT IS REPORTED ON SCHEDULE I, PART II

## **Additional Data**

Middle East and North Africa

## Software ID: Software Version:

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

SEE PART V

288,112

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	1	24	Program services	SEE PART V	1,222,540

0 Grantmaking

roilli 990 Scheuule F Pai	LI - ACLIVILIES	Outside The C	illiteu 3
(a) Region		(c) Number of	
	offices in the	employees or	ın regior
	region	agents in	fundra

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G

**Supplemental Information Regarding** 

**Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

Inspection

DLN: 93493319080948 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ.

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

Name of the organization

**Employer identification number** 

JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. 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 ✓ Mail solicitations e 🗹 Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations 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 ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (v) Amount paid to (vi) Amount paid to (iii) Did (ii) Activity (iv) Gross receipts fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No TELE FUNDRAISING 1 SIEGEL MKTING GROUP INC 1845 N FARWELL AVE SUITE 32,926 300 No 131,856 98,929 MILWAUKEE, MI 53202 5 8 10 Total 131,856 32,926 98,929 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

Sche	edule G (Form 990 or 990-EZ) 2017				Page 2				
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising express receipts greater than \$15,000 of fundraising express greater than \$15,000 of fundraising ex	event contributions and							
	gross receipts greater than \$!	(a)Event #1  Legal Dinner	(b) Event #2  RE & C Dinner	(c)Other events  11 (total number)	(d) Total events (add col (a) through				
Revenue		(event type)	(event type)	(total number)	col <b>(c)</b> )				
ă	1 Gross receipts	911,894	1,821,552	8,365,293	11,098,739				
	2 Less Contributions	731,604	1,359,387	7,909,325	10,000,316				
	3 Gross income (line 1 minus line 2)	180,290							
	4 Cash prizes								
S	5 Noncash prizes								
nse	6 Rent/facility costs								
Direct Expenses	7 Food and beverages	131,992	330,503	367,635	830,130				
ਲੂ	8 Entertainment		1,600		1,600				
Ē	9 Other direct expenses	15,302	25,169	267,609	308,080				
	10 Direct expense summary Add lines 4 t	1,139,810							
	11 Net income summary Subtract line 10	from line 3, column (d)		•	-41,387				
Pai	on Form 990-EZ, line 6a.	anızatıon answered "Ye	es" on Form 990, Part I	V, line 19, or reported	more than \$15,000				
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
	1 Gross revenue								
Expenses	2 Cash prizes								
Ä	3 Noncash prizes								
lect	4 Rent/facility costs								
<u>ā</u>	5 Other direct expenses								
		☐ Yes%	☐ Yes %	☐ Yes %					
	6 Volunteer labor	☐ No	□ No	□ No					
	7 Direct expense summary Add lines 2 through 5 in column (d)								
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	n (d)	•					
9	Enter the state(s) in which the organizati	on conducts gaming activ	ities						
a b	Is the organization licensed to conduct garding.  If "No," explain	☐ Yes ☐ No							
10a b	Were any of the organization's gaming lid If "Yes," explain	•	d or terminated during the	e tax year?	☐ Yes ☐ No				

Sche	dule G (Form 990 or 990-EZ) 2017					F	Page 3				
11	Does the organization conduct gaming	activities with nonmembers?			☐ Yes	□No					
12	Is the organization a grantor, beneficia formed to administer charitable gaming		per of a partnership or other entity		□Yes						
13	Indicate the percentage of gaming activ	vity conducted in									
а	The organization's facility			13a			%				
b	An outside facility			13b			%				
L4	Enter the name and address of the pers	son who prepares the organizatio	n's gaming/special events books and r	ecords							
	Name ►										
	Address ►										
	Does the organization have a contract virevenue?	. ,			□Yes	□No					
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by			he							
С	If "Yes," enter name and address of the third party										
	Name •										
	Address ▶										
.6	Gaming manager information										
	Name ▶										
	Gaming manager compensation ► \$										
	Description of services provided ▶										
	☐ Director/officer	☐ Employee	☐ Independent contractor								
.7	Mandatory distributions										
а	Is the organization required under state retain the state gaming license?	e law to make charitable distribut	ions from the gaming proceeds to		□Yes	Пио					
b	Enter the amount of distributions required in the organization's own exempt activities.		other exempt organizations or spent			0					
Par	t IV Supplemental Informatio	n. Provide the explanations i	equired by Part I, line 2b, columre. Also provide any additional info				 s).				
	Return Reference		Explanation								

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493319080948 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** JEWISH FEDERATION COUNCIL OF GREATER LA 95-1643388 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) See Additional Data (3) (5) (6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 122 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

BUDGETED ALLOCATIONS ADDITIONALLY, THE PROGRAM STAFF MONITORS THE PROGRAM CONTENT OF RESTRICTED GRANTS

SCHEDULE I, PART II

THE JEWISH FEDERATION COUNCIL OF GREATER LOS ANGELES REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501 (C) (3) DOMESTIC U.S. CHARITY. IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSIDIARY OF JFNA, AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) BOTH 501 (C) (3) ORGANIZATIONS EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULE F

Schedule I (Form 990) 2017

## **Additional Data**

ADAT ARI EL

916072198

12020 BURBANK BLVD

VALLEY VILLAGE, CA

Software ID: Software Version:

23-7366318

**EIN:** 95-1643388

501(c)(3)

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ABRAHAM JOSHUA HESCHEL DAY SCHOOL 17701 DEVONSHIRE STREET NORTHRIDGE, CA 91325	95-2794822	501(c)(3)	63,800				SCHOLARSHIPS & STUDENT FINANCIAL AID		

SCHOLARSHIPS &

AID

STUDENT FINANCIAL

28,100

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 90-0086051 501(c)(3) 70.000 AISH TAMID OF LOS ANGELES IGENERAL SUPPORT 5909 WEST THIRD STREET LOS ANGELES, CA 90036 95-1684064 501(c)(3) 236,300 GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AMERICAN JEWISH UNIVERSITY

15600 MULHOLLAND DRIVE LOS ANGELES, CA 90077

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-4439460 501(c)(3) 28.500 STUDENT FINANCIAL BAIS CHAYA MUSHKA SCHOOL AID

AID

FOR GIRLS 9051 W PICO BLVD LOS ANGELES, CA 90035 BAIS YAAKOV SCHOOL FOR 95-3127279 501(c)(3) 38.950 STUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GIRLS

7353 BEVERLY BLVD LOS ANGELES, CA 90036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance BEIT T'SHUVAH 77-0152646 501(c)(3) 138.000 LOCAL AGENCY 8831 VENICE BLVD SUPPORT

8831 VENICE BLVD
LOS ANGELES, CA 900340000

BET TZEDEK LEGAL SERVICES 23-7304205 501(c)(3) 345,000

LOCAL AGENCY SUPPORT
FLOOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 900101509

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-4092050 501(c)(3) 1,466,474 IGENERAL SUPPORT BIRTHRIGHT ISRAEL **FOLIND ATTON** 

B'NAI B'RITH YOUTH	31-1794932	501(c)(3)	24,130		GENERAL S
33 EAST 33RD STREET 7TH FLOOR NEW YORK, NY 10016					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20001

L SUPPORT ORGANIZATION 800 EIGHTH STREET NW

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

FINANCIAL AID

BNEI AKIVA LOS ANGELES 9030 WEST OLYMPIC BLVD BEVERLY HILLS, CA 90211	26-2103488	501(c)(3)	61,050		CAMP GRANTS & SCHOLARSHIPS
DNIET ALTIVA OF NEW YORK INC	F6 3361801	E01/-\/2\	12.250		DD CCD ANA

BNEI AKIVA OF NEW YORK INCI 56-2361891 501(c)(3) 13,2501 IPROGRAM GRANTS/STUDENT 520 8TH AVENUE 15TH FL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10018

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-8992789 501(c)(3) 13.300 STUDENT FINANCIAL BNOS DEVORAH HIGH SCHOOL AID

IGENERAL SUPPORT

SCHOOL
461 N LA BREA AVENUE
LOS ANGELES, CA 90036

BUILDERS OF JEWISH 95-4280178 501(c)(3) 1,235,948
EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6505 WILSHIRE BLVD STE 300 LOS ANGELES, CA 90048

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-1843131 501(c)(3) 361.700 CAMP GRANTS CAMP RAMAH IN CALIFORNIA INC 17525 VENTURA BLVD STE

GENERAL SUPPORT

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

20-8117991

201

ENCINO, CA 91316

CHABAD AT CSUN

17833 PRAIRIE STREET NORTHRIDGE, CA 91325

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 47-4960401 501(c)(3) 12.000 STUDENT FINANCIAL CHABAD AT PIERCE 20510 HAMLIN ST WINNETKA, CA 91306

GENERAL SUPPORT

15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

CHABAD OF CONEJO

30345 CANWOOD STREET AGOURA HILLS, CA 91301 77-0304127

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-4867184 501(c)(3) 35.000 CHABAD ON 17TH STREET IN IGENERAL SUPPORT S MONICA INC 1428 17TH ST

IGENERAL SUPPORT

65.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

1428 17TH ST SANTA MONICA, CA 90404 CHALLIFFLINE INC

151 W 30TH STREET NEW YORK, NY 10001 11-2940331

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

LATD

CHALLAH FOR HUNGER 201 S CAMAC ST FLOOR 2 PHILADELPHIA, PA 19107	26-1540827	501(c)(3)	23,000		GENERAL SUPPORT
CHEDER MENACHEM MENDEL	95-4434095	501(c)(3)	52,050		STUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1606 S LA CIENEGA BLVD LOS ANGELES, CA 90035

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

COLEL CHABAD 806 EASTERN PARKWAY BROOKLYN, NY 11213	11-3254483	501(c)(3)	8,250		GENERAL SUPPORT
COMMUNITY INITIATIVES	94-3255070	501(c)(3)	102,874		PROGRAM GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

354 PINE STREET SUITE 700 SAN FRANCISCO, CA 94104

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-4302067 501(c)(3) 49.500 PROGRAM GRANTS COMMUNITY PARTNERS 1000 N ALAMEDA STREET

AID

SUITE 240
LOS ANGELES, CA 900121804

CONGREGATION BETH HILLEL 95-1765175 501(c)(3) 11,400

OF SF VALLEY

SCHOLARSHIPS & STUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

12326 RIVERSIDE DRIVE

VALLEY VILLAGE, CA 91607

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 95-2546462 501(c)(3) 31.000 SCHOLARSHIPS & CONGREGATION NER TAMID OF SOUTH BAY STUDENT FINANCIAL 5721 CRESTRIDGE ROAD LATD RANCHO PALOS VERDES, CA 902750000

STUDENT FINANCIAL

AID

18,400

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

95-4614448

CONGREGATION OR AMI

26115 MUREAU ROAD B

CALABASAS, CA 91302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance DE TOLEDO HIGH SCHOOL 95-4805188 501(c)(3) 237.750 ISCHOLARSHIPS & 22622 VANOWEN STREET STUDENT FINANCIAL

WEST HILLS, CA 91307

EMEK HEBREW ACADEMY
TEICHMAN FAMILY TORAH
15365 MAGNOLIA BLVD

STUDENT FINANCIAL
AID

STUDENT FINANCIAL
AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SHERMAN OAKS, CA 91403

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 95-4308644 501(c)(3) 205.000 ETTA ISRAEL CENTER IGENERAL SUPPORT 12722 RIVERSIDE DR SUITE 105 NORTH HOLLYWOOD, CA 91607 501(c)(3) 10,000 EXECUTIVE SERVICE CORPS 95-3510781 IGENERAL SUPPORT

OF SOUTHERN CA 1000 N ALAMEDA STREET SUITE 330

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90012

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FRIENDS OF ISRAEL SCOUTS 13-3843506 501(c)(3) 7.000 IGENERAL SUPPORT INC

575 8TH AVENUE 11TH FLOOR
NEW YORK, NY 10018

FRIENDSHIP CIRCLE LOS 20-3270890 501(c)(3) 138,500

ANGELES 1952 S ROBERTSON BLVD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90034

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

STUDENT FINANCIAL

GAINESVILLE HILLEL INC 2020 W UNIVERSITY AVE GAINESVILLE, FL 32603	65-1090524	501(c)(3)	20,000		GENERAL SUPPORT
GINDI MAIMONIDES ACADEMY	95-3214146	501(c)(3)	55,750		SCHOLARSHIPS &

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8511 BEVERLY PLACE LOS ANGELES, CA 90048

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-1929706 501(c)(3) 72,350 CAMP GRANTS & HABONIM DROR CAMP GILBOA

AID

8339 W 3RD ST SCHOLARSHIPS LOS ANGELES, CA 90048 95-1662972 501(c)(3) 64,400 SCHOLARSHIPS & HARKHAM HILLEL HEBREW

ACADEMY ISTUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

9120 WEST OLYMPIC BLVD

BEVERLY HILLS, CA 90212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-0537067 501(c)(3) 52.000 HEBREW UNION COLLEGE-IGENERAL SUPPORT JEWISH INST OF REL 3101 CLIFTON AVENUE

IGENERAL SUPPORT

192.300

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

3101 CLIFTON AVENUE CINCINNATI, OH 45220

17729 PLUMMER ST NORTHRIDGE, CA 91325 46-0893850

HTI I FI 818

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-0573247 501(c)(3) 181.400 HILLEL AT UCLA IGENERAL SUPPORT 574 HILGARD AVENUE

574 HILGARD AVENUE
LOS ANGELES, CA 90024

HONEYMOON ISRAEL 47-1291052 501(c)(3) 25,000

STUDENT FINANCIAL
AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6070 WHITEGATE CROSSING EAST AMHERST, NY 14051

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

IKAR 4311 WILSHIRE BLVD 618 LOS ANGELES, CA 90010	20-1210098	501(c)(3)	43,500		LOCAL AGENCY SUPPORT

ILAN RAMON DAY SCHOOL 23,750 95-4661185 501(c)(3) ISCHOLARSHIPS & STUDENT FINANCIAL 27400 W CANWOOD STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AGOURA HILLS, CA 91301

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-1264680 501(c)(3) 28.000 LOCAL AGENCY IMAGINATION PRODUCTIONS INC SUPPORT 11110 W OAKLAND PARK BLVD

GENERAL SUPPORT

9,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

288 SUNRISE, FL 33351

PO BOX 7367 26238

INTERFAITH INVENTIONS INC

LOS ANGELES, CA 900070367

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 95-4821608 501(c)(3) 7.500 PROGRAM INTERNATINAL SEPHARDIC EDUCATIONAL CENTER GRANTS/STUDENT FINANCIAL AID 6505 WILSHIRE BLVD SUITE 300 LOS ANGELES, CA 90048

IGENERAL SUPPORT

49,273

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

13-1919802

LOS ANGELES, CA 90048

JEWISH AGENCY AMERICAN
SECTION INC
633 THIRD AVENUE 21ST

NEW YORK, NY 10017

FLOOR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 95-1691009 501(c)(3) 367,012 LOCAL AGENCY JEWISH BIG BROTHERS BIG

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

9326 SAWYER STREET

LOS ANGELES, CA 90035

SISTERS OF LA 6505 WILSHIRE BOULEVARD SUITE 600 LOS ANGELES, CA 90048					SUPPORT
JEWISH COMMUNITY CHILDREN'S CHOIR	46-5085440	501(c)(3)	13,000		PROGRAM GRANTS/STUDENT

FINANCIAL AID

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance JEWISH FAMILY SERVICE OF 95-1691013 501(c)(3) 2,971,027 LOCAL AGENCY LOS ANGELES SUPPORT 3580 WILSHIRE BLVD SUITE

700
LOS ANGELES, CA 90010

JEWISH FREE LOAN
ASSOCIATION
6505 WILSHIRE BLVD SUITE

LOCAL AGENCY
SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

715

LOS ANGELES, CA 90048

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 26-2173175 501(c)(3) 45.000 JEWISH JUMPSTART IGENERAL SUPPORT 2801 OCEAN PARK BLVD BOX 348 SANTA MONICA, CA 904052905

SANTA MONICA, CA
904052905

JEWISH LOS ANGELES
SPECIAL NEEDS TRUST
6505 WILSHIRE BLVD SUITE
450

SANTA MONICA, CA
904052905

PROGRAM
GRANTS/STUDENT
FINANCIAL AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90048

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance JEWISH VOCATIONAL SERVICE 95-1691012 501(c)(3) 463,849 LOCAL AGENCY 6505 WILSHIRE BLVD SUPPORT

STUDENT FINANCIAL

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LOS ANGELES, CA 90048

15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

JEWISH WORLD WATCH

5551 BALBOA BLVD

ENCINO, CA 91316

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance RAL SUPPORT

GENERAL SUPPORT & STUDENT FINANCIAL

JQ INTERNATIONAL INC	68-0601176	501(c)(3)	184,099		GENERA
801 LARRABEE ST 10					
WEST HOLLYWOOD, CA 90069					

39,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

KADIMA HEBREW ACADEMY

7011 SHOUP AVENUE WEST HILLS, CA 91307

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance LEO BAECK TEMPLE 95-1916026 501(c)(3) 24.750 SCHOLARSHIPS & 1300 N SEPULVEDA BLVD STUDENT FINANCIAL AID

LOS ANGELES, CA 90049

LOS ANGELES HEBREW HIGH
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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

VAN NUYS, CA 91411

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-0503824 501(c)(3) 60,800 LOS ANGELES MUSEUM OF IGENERAL SUPPORT

SCHOLARSHIPS

MACHANEH MAMOSH INC	95-4518038	501(c)(3)	12,650		CAMP GRANTS &
THE HOLOCAUST  100 S THE GROVE DRIVE  LOS ANGELES, CA 90036					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1444 17TH STREET 4

SANTA MONICA, CA 90404

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-5571355 501(c)(3) 40.000 IGENERAL SUPPORT

STUDENT FINANCIAL

AID

MATI-ISRAELI COMMUNITY CENTER 19626 VENTURA BLVD SUITE 214A TARZANA, CA 91356

14,250

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

MESIVTA BIRKAS YITZCHAK

LOS ANGELES, CA 90035

6022 W PTCO BLVD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-4621495 501(c)(3) 19.950 STUDENT FINANCIAL MESIVTA OF GREATER LOS ANGELES

AID

ANGELES
25115 MUREAU RD
CALABASAS, CA 91302

MILKEN COMMUNITY SCHOOLS 95-4381008 501(c)(3) 288,350 STUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

15800 ZELDINS WAY

LOS ANGELES, CA 90049

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-2599786 501(c)(3) 51.600 GENERAL MOISHE FOUNDATION ISUPPORT/LOCAL

441 SAXONY ROAD ENCINITAS, CA 92024 AGENCY SUPPORT MOVING TRADITIONS 34-2015014 501(c)(3) 100,000 GENERAL SUPPORT 261 OLD YORK ROAD SUITE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JENKINTOWN, PA 19046

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 47-1520327 501(c)(3) 30.000 PROGRAM NAGEL JEWISH ACADEMY

FINANCIAL AID

1807 S FAIRFAX AVE
LOS ANGELES, CA 90019

NATIONAL RAMAH
COMMISSION INC

RRANTS/STUDENT
FINANCIAL AID

PROGRAM
GRANTS/STUDENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3080 BROADWAY

NEW YORK, NY 10027

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NER ARYEH 95-4118740 501(c)(3) 10.450 STUDENT FINANCIAL 12156 SHERMAN WAY AID

STUDENT FINANCIAL

AID

14.250

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

NORTH HOLLYWOOD, CA 91605 OHEL CHANA

341

7162 BEVERLY BLVD SUITE

LOS ANGELES, CA 90036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 81-2507413 501(c)(3) 20.470 ONWARD ISRAEL USA INC PROGRAM GRANTS TE 715

STUDENT FINANCIAL

AID

23.750

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

310 GRANT STRE	ET 201
PITTSBURGH, PA	15219
OR-HACHAIM ACA	DEMY
6021 LAUREL CAN	NOV

NORTH HOLLYWOOD, CA

91606

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-5623717 501(c)(3) 149.850 ORTHODOX UNION IGENERAL SUPPORT 11 BROADWAY 14TH FLOOR

PROGRAM GRANTS

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

PICO UNION PROJECT INC

1153 VALENCIA STREET LOS ANGELES, CA 90015

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 77-0568469 501(c)(3) 6.000 READING PARTNERS PROGRAM GRANTS 180 GRAND AVE 800

GENERAL SUPPORT

29,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

OAKLAND, CA 94612

REBOOT INC
44 W 28TH STREET 8TH

NEW YORK, NY 10001

FLOOR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 81-4561235 501(c)(3) 18.000 SABABA SURF CAMP INC PROGRAM GRANTS 106-06 QUEENS BLVD FOREST HILLS, NY 11375 SEPHARDIC TRADITION AND 95-4692703 501(c)(3) 26,150 PROGRAM GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RECREATION INC. 6634 VALJEAN AVE

VAN NUYS, CA 91406

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-4715368 501(c)(3) 19.000 SHABBAT PROJECT INC. IPROGRAM GRANTS 79 MADISON AVENUE FLOOR 2

ATD

NEW YORK, NY 10016

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

910 S FAIRFAX AVENUE

LOS ANGELES, CA 90036

SHALHEVET HIGH SCHOOL 95-4330860 501(c)(3) 47,500 STUDENT FINANCIAL

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 13-3014387 501(c)(3) 24,000 RABBINIC LEADERSHIP SHALOM HARTMAN INSTITUTE

OF NORTH AMERICA ONE PENNSYLVANIA PLAZA SUITE 1606 NEW YORK, NY 10119					PROGRAM SUPPORT
SHALOM INSTITUTE CAMP AND	84-1652923	501(c)(3)	578.450		GENERAL SUPPORT

(-)(-) CONFERENCE CENTER 34342 MULHOLLAND HIGHWAY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MALIBU, CA 90265

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 32-0003071 501(c)(3) 232.500 SILVERLAKE INDPDNT JEWISH IGENERAL SUPPORT

COMMUNITY CENTER 1110 BATES AVENUE LOS ANGELES, CA 90029

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

10400 WILSHIRE BLVD

LOS ANGELES, CA 90024

SINAL TEMPLE 95-2103898 501(c)(3) 95.800 STUDENT FINANCIAL

AID/GENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-3877793 501(c)(3) 6,000 STUDENT FINANCIAL SOUTH CENTRAL FAMILY

STEPHEN S WISE TEMPLE	95-6087552	501(c)(3)	98 000			STUDENT FINANCIAL
1111 E VERNON AVE LOS ANGELES, CA 90011						
HEALIH CENTER				1		AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

301(0)(3) 15500 STEPHEN S WISE DRIVE AID/EDUCATION LOS ANGELES, CA 90077 GRANTS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 94-3227261 501(c)(3) 6.750 CAMP GRANTS TAWONGA JEWISH

COMMUNITY CORPORATION 131 STEUART STREET STE 460 SAN FRANCISCO, CA 94105

95-1932032 501(c)(3) 34,600 CAMP GRANTS & TEMPLE AKTBA 5249 SEPULVEDA BLVD SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CULVER CITY, CA 90230

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-2236425 501(c)(3) 9.700 STUDENT FINANCIAL TEMPLE ALIYAH 6025 VALLEY CIRCLE BLVD

WOODLAND HILLS, CA 91367

TEMPLE BETH AM INC 95-1656370 501(c)(3) 76,250

GENERAL SUPPORT 95-1656370 GENERAL SUPPORT 95-1656370

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90035

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-1691319 501(c)(3) 22.500 TEMPLE ISAIAH IGENERAL SUPPORT 10345 WEST PICO BLVD

10345 WEST PICO BLVD
LOS ANGELES, CA 90064

TEMPLE ISRAEL OF 23-7383024 501(c)(3) 44,750
HOLLYWOOD
7300 HOLLYWOOD BLVD
GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90046

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 77-0005548 501(c)(3) 12.000 TEMPLE KOL TIKVAH IGENERAL SUPPORT 20400 VENTURA BLVD

PROGRAM GRANTS

24,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

WOODLAND HILLS, CA 91364

27-3084801

THE ADVOT PROJECT

5870 W OLYMPIC BLVD LOS ANGELES, CA 90019

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-2291627 501(c)(3) 20.000 THE ALEPH INSTITUTE INC PROGRAM GRANTS 9540 COLLINS AVENUE SURFSIDE, FL 33154

GENERAL SUPPORT

8.255.125

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

SURFSIDE, FL 33154

THE JEWISH FEDERATIONS OF NORTH AMERICAUJC

25 BROADWAY SUITE 1700 NEW YORK, NY 10004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 80-0716359 501(c)(3) 35.000 THE JEWISH GRADUATE IGENERAL SUPPORT STUDENT INITIATIVE INC 1445 S BEVERLY DRIVE

1445 S BEVERLY DRIVE
LOS ANGELES, CA 90035

THE MIRACLE PROJECT 27-4030539 501(c)(3) 30,000 GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

9301 WILSHIRE BLVD STE 507 BEVERLY HILLS, CA 90210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 36-4630389 501(c)(3) 26.000 IGENERAL SUPPORT THE SURVIVOR MITZVAH 2658 GRIFFITH PARK BLVD

STUDENT FINANCIAL

AID

17,100

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

95-4711877

PROJECT 299 LOS ANGELES, CA 90039

1210 S LA CIENEGA BLVD

LOS ANGELES, CA 90035

TORAT HAYIM

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 75-3002144 501(c)(3) 140.000 LOCAL AGENCY TOUCH OF KINDNESS INC 345 NORTH LA BREA SUITE SUPPORT

208 LOS ANGELES, CA 90036					
UCLA CENTER FOR JEWISH STUDIES 10745 DICKSON PLAZA 302 ROYCE HALL	95-6006143	501(c)(3)	30,000		GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90095

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applıcable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance LINITON FOR REFORM TURNICM 12 1662142 E01(-)(2) 110 000 IGENERAL SUPPORT

633 THIRD AVENUE 7TH FLOOR NEW YORK, NY 10017	13-1663143	501(c)(3)	110,000		GENERAL SUPPO
URJ CAMP NEWMAN	94-1480908	501(c)(3)	9,750		CAMP GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

711 GRAND AVENUE SUITE

SAN RAFAEL, CA 94901

280

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

USC HILLEL FOUNDATION	95-4867366	501(c)(3)	185,300		GENERAL SUPPORT
3300 SOUTH HOOVER STREET					
LOS ANGELES, CA 90007					

3300 SOUTH HOOVER STREET LOS ANGELES, CA 90007						
VALLEY BETH SHALOM 15739 VENTURA BLVD	95-1890769	501(c)(3)	78,000		I .	SCHOLARSHIPS & STUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ENCINO, CA 91436

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-3165544 501(c)(3) 39.900 VALLEY TORAH HIGH SCHOOL STUDENT FINANCIAL 12517 CHANDLER BLVD

12517 CHANDLER BLVD
VALLEY VILLAGE, CA 91607

VISTA DEL MAR CHILD & 95-1647832 501(c)(3) 19,000

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3200 MOTOR AVENUE LOS ANGELES, CA 90035

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-1691010 501(c)(3) 234.550 IGENERAL SUPPORT WESTSIDE JEWISH COMMUNITY CENTER INC

AID/CAMP GRANTS

5870 WEST OLYMPIC BLVD LOS ANGELES, CA 90036 95-1691339 501(c)(3) 289.950 STUDENT FINANCIAL WILSHIRE BOULEVARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TEMPLE 3663 WILSHIRE BOULEVARD

LOS ANGELES, CA 90010

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-4535180 501(c)(3) 93.503 WISE FREEDOM SCHOOL IGENERAL SUPPORT

ISTUDENT FINANCIAL

AID

PARTNERS 15500 STEPHEN WISE DRIVE LOS ANGELES, CA 90077

31.350

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

YAVNEH HEBREW ACADEMY

LOS ANGELES, CA 90020

5353 W 3RD ST

95-2117190

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-3405695 501(c)(3) 33.250 STUDENT FINANCIAL YESHIVA AHARON YAAKOV OHR ELIYAHU AID 241 S DETROIT STREET LOS ANGELES, CA 90036

STUDENT FINANCIAL

AID

15.200

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

YESHIVA GEDOLAH OF LOS

5444 OLYMPIC BLVD LOS ANGELES, CA 90036

ANGELES

95-3298317

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-4384473 501(c)(3) 24.700 STUDENT FINANCIAL YESHIVA OHR ELCHONON CHABAD 7215 WARING AVENUE

ISTUDENT FINANCIAL

AID

95.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

LOS ANGELES, CA 90046
YESHIVA RAV ISACSOHN

540 N LA BREA AVENUE

LOS ANGELES, CA 90036

95-1962397

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 20-3081128 501(c)(3) 25,650 STUDENT FINANCIAL YESHIVA UNIVERSITY OF LA DOVO LITCH COLICO

1619 SOUTH ROBERTSON BLVD LOS ANGELES, CA 90035					AID
YESHIVA UNIVERSITY OF LA GIRLS HIGH SCHOOL	42-1746735	501(c)(3)	38,000		STUDENT FINANCIAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GIRLS HIGH SCHOOL 9760 WEST PICO BLVD

LOS ANGELES, CA 90035

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-1887722 501(c)(3) 9.500 STUDENT FINANCIAL

YESHIVAT OHR CHANOCH INC. 8906 W PICO BLVD LOS ANGELES, CA 90035

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90048

ZIMMER CHILDREN'S MUSEUM 20-1470992 501(c)(3) 43,500 LOCAL AGENCY 6505 WILSHIRE BLVD STE 100 SUPPORT

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Data	a -	DLN: 934	9331	9080	948
Sch	edule J	Com	pensati	ion Information	OM	IB No	1545-0	0047
(For	n 990)	For certain Officers,	Directors, T	rustees, Key Employees, and Hig	hest			
		► Complete if the organi		ated Employees vered "Yes" on Form 990, Part IV	. line 23.	20	17	7
		-	▶ Attach	to Form 990.				
•	tment of the Treasury al Revenue Service	► Information about		(Form 990) and its instructions gov/form990.	is at		to Pul ectio	
	me of the organiza				Employer identificat	ion nu	ımber	
JEW	ISH FEDERATION CO	DUNCIL OF GREATER LA			95-1643388			
Pa	rt I Questi	ons Regarding Compensation	1					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		or charter travel		Housing allowance or residence for	personal use			
	_	companions		Payments for business use of perso				
		nification and gross-up payments		Health or social club dues or initiation				
	Discretion	ary spending account		Personal services (e g , maid, chauf	reur, cher)			
b		kes in line 1a are checked, did the o Il of the expenses described above?		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all	. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/Exec	utive Director	r, regarding the items checked in line	e la'			
3				ed to establish the compensation of the	ne			
		EO/Executive Director Check all tha d organization to establish compens		not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	✓ Compensa		<b>✓</b>	Works a small consent as about				
		ition committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	<b>7</b>	Approval by the board or compensa	tion committee			
4		-	Part VII Se	ction A, line 1a, with respect to the f				
	related organiza			calon, t, and fa, was respect to the t	ming organization of a			
а	Receive a sever	ance payment or change-of-control	payment?			4a		No
b	Participate in, o	receive payment from, a suppleme	ntal nonqual	ıfıed retırement plan?		4b		No
С		receive payment from, an equity-b		_		4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and pro	ovide the app	plicable amounts for each item in Par	t III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) org	nanizations	must complete lines 5-9.				
5	For persons liste	ed on Form 990, Part VII, Section A,	_					
	compensation c	ontingent on the revenues of						
а	The organization	17				5a		No
b	Any related orga					5b		No
_	-	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section A, ontingent on the net earnings of	line 1a, did	the organization pay or accrue any				
а	The organization					6a		No
b	Any related orga					6b		No
7	•	6a or 6b, describe in Part III	line to distri	the enganisation partial control of	al .			
7		ed on Form 990, Part VII, Section A, escribed in lines 5 and 67 If "Yes," d		the organization provide any nonfixe rt III	a	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," di	escribe	8		No
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow th	e rebuttable	presumption procedure described in	Regulations section	9		
For I	Danerwork Redi	ction Act Notice, see the Instru	tions for Fo	orm 990 Cat No. 5	50053T Schedule 1	(Form	990)	2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Instructions, on row (II) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title			of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	D) Nontaxable (E) Total of columns		
		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
1 CAROL KORANSKY EVP DIRECTOR VALLEY	(i)	221,266	0	9,155	33,444	1,536	265,401	0	
ALLTANCE	(ii)	0	0	0	0	0	0	0	
2 DENISE OSSO CHIEF CREATIVE DIRECTOR	(i)	174,478	0	3,168	78,450	13,653	269,749	0	
The state of the s	(ii)	0	0	0	0	0	0	0	
3 CYNTHIA AYALA SVP ADMINISTRATION & HR	(i)	171,836	0	9,202	56,618	3,467	241,123	0	
	(ii)	0	0	0	0	0	0	0	
4 REBECCA SOBELMAN-STERN	(i)	214,427	0	2,544	10,850	2,600	230,421	0	
EVD CHIEF DDOCDAM	(ii)	0	0	0	0	0	0	0	
5 JAY SANDERSON CEO/PRESIDENT	(i)	490,000	50,000	23,440	13,499	47,889	624,828	0	
CEO/TRESIDENT	(ii)	0	0	0	0	0	0	0	
6 IVAN WOLKIND CFO/COO	(i)	300,400	0	9,154	13,500	21,041	344,095	0	
	(ii)	0	0	0	0	0	0	0	
7 ANDREW CUSHNIR EVP CHIEF DEVELOPMENT	(i)	280,584	0	9,016	40,780	2,748	333,128	0	
OFFICER	(ii)	0	0	0	0	0	0	0	
8 CATHERINE SCHNEIDER ASSOC CHIEF DEVLPMT	(i)	190,000	0	531	9,500	83	200,114	0	
OFFICER	(ii)	0	0	0	0	0	0	0	
9 LORI KLEIN SR VP CARING FOR JEWS IN	(i)	170,258	0	1,045	8,590	2,683	182,576	0	
NEED	(ii)	0	0	0	0	0	0	0	
							Schedule	J (Form 990) 2017	

	1 age 5				
Part III Supplemental Information					
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation				
	CERTAIN EXECUTIVES ARE PROVIDED WITH AUTO ALLOWANCES AS PART OF THEIR COMPENSATION AGREEMENTS. THE ALLOWANCES ARE INCLUDED IN TAXABLE COMPENSATION. ADDITIONALLY, SPOUSAL TRAVEL IS PROVIDED TO THE CEO ON CERTAIN INTERNATIONAL TRIPS SUBJECT TO APPROVAL BY THE CHAIRPERSON OF THE BOARD OF DIRECTORS AND AN ANNUAL CAP OF \$7,500				

Page 3

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

DISCRETION

SCHEDULE J, PART I, LINE 7 THE CEO'S EMPLOYMENT AGREEMENT PROVIDES FOR A DISCRETIONARY BONUS EACH YEAR AS MAY BE DETERMINED BY THE BOARD OF DIRECTORS IN ITS SOLE

#### **Additional Data**

1DENISE OSSO

2CYNTHIA AYALA

REBECCA SOBELMAN-

EVP CHIEF PROGRAM

CEO/PRESIDENT

5IVAN WOLKIND

**6**ANDREW CUSHNIR

EVP CHIEF DEVELOPMENT

**7**CATHERINE SCHNEIDER

SR VP CARING FOR JEWS IN

ASSOC CHIEF DEVLPMT

3

STERN

**OFFICER** 4JAY SANDERSON

CFO/COO

OFFICER

OFFICER 8LORI KLEIN

NEED

CHIEF CREATIVE DIRECTOR

SVP ADMINISTRATION & HR

[(II)

(1)

(1)

(1)

(II)

**Software Version:** 

174,478

171,836

214,427

490,000

300,400

280,584

190,000

170,258

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

50,000

Software ID:

Form 990, Schedule	J,	Part II - Officers, D	irectors, Trustees, K	ey Employees, and I	Highest Compensate	d Employees				
(A) Name and Title	Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirem		A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Reti				(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990		
1CAROL KORANSKY EVP DIRECTOR VALLEY	(1)	221,266	0	9,155	33,444	1,536	265,401	0		
ALLIANCE	(11)	o	l	o	ار	0	n	1		

3,168

9,202

2,544

23,440

9,154

9,016

531

1,045

78,450

56,618

10,850

13,499

13,500

40,780

9,500

8,590

13,653

3,467

2,600

47,889

21,041

2,748

83

2,683

269,749

241,123

230,421

624,828

344,095

333,128

200,114

182,576

(Form 990)  NONCASN CONTRIBUTIONS  Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  Attach to Form 990.  Pepartment of the Treasury  Information about Schedule M (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> Operations of the Treasury	1545-0	948
Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.   Attach to Form 990.   Information about Schedule M (Form 990) and its instructions is at		047
Name of the organization   Sewart   Types of Property   Sewart   Types of Property   Sewart   Service   Service   Service   Several	117	<del></del>
Part I   Types of Property   Types of Property   Part I   Types of Art—Historical treasures   Part I	)17	!
Department of the Ireasure   Name of the organization   Jewish Federation Council of Greater LA   September   Se		
Part I Types of Property  (a) Check if applicable lems contributed riems contributed riems contributed roncash contributed ron	to Pub pectior	
Part I Types of Property  (a) Check if applicable items contributions or items contributed items contributed items contributed items contributed items contributed items contributed items contributed items contributed items contributed items contributed in amounts reported on Form 990, Part VIII, line 1g  1 Art—Works of art	numbe	r
(a) Check if applicable litems contributions or items contributed place of contribution amounts reported on Form 990, Part VIII, line 1g  1 Art—Works of art		
Check if applicable		
Art—Historical treasures		cs
Art—Fractional interests		
4 Books and publications		
5 Clothing and household goods		
goods		
6 Cars and other vehicles X 31 43,925 COST/SELLING PRICE  7 Boats and planes  8 Intellectual property  9 Securities—Publicly traded . X 175 2,045,549 COST/SELLING PRICE		
7 Boats and planes 8 Intellectual property 9 Securities—Publicly traded . X 175 2,045,549 COST/SELLING PRICE		
8 Intellectual property		
9 Securities—Publicly traded . X 175 2,045,549 COST/SELLING PRICE		
11 Securities—Partnership, LLC, or trust interests		
12 Securities—Miscellaneous		
13 Qualified conservation contribution—Historic structures		
14 Qualified conservation contribution—Other		
15 Real estate—Residential .		
16 Real estate—Commercial		
17 Real estate—Other		
18 Collectibles		
19 Food inventory		
20 Drugs and medical supplies .		
21 Taxidermy		
22 Historical artifacts		
23 Scientific specimens		
24 Archeological artifacts		
25 Other ► ( X 9 80,000 COST/SELLING PRICE STATE OF ISRAEL BOND )		
26 Other ▶ ()		
27 Other • ()		
28 Other • ()		
29 Number of Forms 8283 received by the organization during the tax year for contributions		
for which the organization completed Form 8283, Part IV, Donee Acknowledgement		
	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		
b If "Yes," describe the arrangement in Part II	a	No
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash		
b If "Yes," describe in Part II	a Yes	<u> </u>
		1
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,		1
describe in Part II  For Paperwork Reduction Act Notice, see the Instructions for Form 990  Cat. No. 512271  Schedule M (F		<u> </u>

Schedule M (Form 990) (2017)

Page 2

 ${\sf PROFIT}$  ORGANIZATION. CARS, AS A THIRD PARTY TO ASSIST WITH VEHICLE DONATIONS. THE DONOR NOTIFIES THE FEDERATION THAT THEY PLAN TO DONATE A VEHICLE. AND ARRANGEMENTS ARE THEN MADE BETWEEN THE DONOR AND CARS FOR THE PICK UP OF THE VEHICLE CARS WILL TOW THE VEHICLE AND MAKE ALL ARRANGEMENTS NECESSARY FOR THE SALE OF THE VEHICLE ONCE THE VEHICLE HAS BEEN SOLD. CARS WILL PREPARE A LETTER TO THE DONOR THANKING THEM FOR THEIR DONATION TO

THE FEDERATION. AND WILL DISCLOSE IN THE LETTER IF THE CAR WAS SOLD FOR LESS THAN OR MORE THAN \$500 CARS IS AWARDED 30% OF THE GROSS SALES PRICE LESS EXPENSES, AND THE FEDERATION RECEIVES 70% OF THE GROSS SALES PRICE LESS EXPENSES. Schedule M (Form 990) (2017)

efile GRAPH	DLN: 9	93493319080948		
SCHEDUL	E O Supplemental Information to Fo	rm 990 or 990-F7	OMB No 1545-0047	
(Form 990 or 990- EZ)  Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.  ► Attach to Form 990 or 990-EZ.  ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.				
Internal Revenue Ser Name of the org JEWISH FEDERATION	anization ON COUNCIL OF GREATER LA	Employer identif	ication number	
990 Schedule	e O, Supplemental Information	·		
Return Reference	Explanation	n		
FORM 990, PART I, LINE 1 & PART III, LINE 1	MISSION STATEMENT BASED ON JEWISH VALUES, THE JEWISH VENES AND LEADS THE COMMUNITY AND LEVERAGES ITS RES JEWISH PEOPLE, SUPPORT A SECURE STATE OF ISRAEL, CARE D MOBILIZE ON ISSUES OF CONCERN TO THE COMMUNITY, ALL ATIONAL PARTNERS	DURCES TO ASSURE THE CONTINU FOR JEWS IN NEED HERE AND ABF	ITY OF THE ROAD, AN	

Return Reference	Explanation
FORM 990, PART III, LINE 4	PROGRAM SERVICE ACTIVITY #1 - ENSURING THE JEWISH FUTURE THE FEDERATION CREATES OPPORTUNIT IES FOR PEOPLE OF ALL AGES TO PARTICIPATE AND CELEBRATE IN JEWISH LIFE AND CONNECT WITH THE COMMUNITY AND ISRAEL TO DO SO, WE WORK TO ENSURE THE QUALITY AND REDUCE THE COST OF JEW ISH EDUCATIONAL EXPERIENCES, TRAIN LEADERS WHO WILL TEACH JEWISH VALUES TO NEW GENERATIONS, ENGAGE LOCAL SYNAGOGUES, THE LIFEBLOOD OF THE JEWISH COMMUNITY, AND SEND THOUSANDS ON ED UCATIONAL MISSIONS TO ISRAEL, ENSURING THAT STRONG CONNECTIONS WILL PERSIST AS THE HUB OF THE COMMUNITY, THE FEDERATION IS UNIQUELY POSITIONED TO CONNECT JEWS TO ONE ANOTHER AND M AKE JEWISH LIFE ACCESSIBLE AND AFFORDABLE BY LEVERAGING THE STRENGTH OF OUR MEMBERS AND WO RKING CLOSELY WITH OUR NETWORK OF TRUSTED PARTNERS PROGRAM SERVICE ACTIVITY #2 - CARING F OR JEWS IN NEED THE FEDERATION LEVERAGES THE STRENGTH OF ITS COMMUNITY TO PROVIDE AID FOR JEWS IN NEED THE WELL-BEING OF JEWISH SENIORS IS ALSO A CORE PRIORITY, ESPECIALLY WHEN A SENIOR IS A HOLOCAUST SURVIVOR OUR WORK ALSO INCLUDES SEEING TO DAILY NECESSITIES OF THOS E IN NEED, CONNECTING PEOPLE TO THE SKILLS AND SERVICES NECESSARY TO BE SELF-SUFFICIENT, A ND ENSURING CHILDREN WITH SPECIAL NEEDS AND OTHER AT-RISK CASES HAVE THEIR NEEDS MET AND C AN PARTICIPATE IN JEWISH LIFE THE FEDERATION IS ABLE TO CARE FOR OUR OWN COMMUNITY BY WOR KING WITH PARTNERS IN LOS ANGELES, ISRAEL, AND OVER 55 COUNTRIES AROUND THE WORLD PROGRAM SERVICE ACTIVITY #3 - COMMUNITY ENGAGEMENT FOR THE PAST 100 YEARS, THE JEWISH FEDERATION HAS ENGAGED IN OUR CITY, PROMOTING AN INCLUSIVE COMMUNITY THAT REFLECTS THE BEST OF AMERIC AN AND JEWISH VALUES THE PURSUIT OF A JUST SOCIETY, ENSURING A STRONG JEWISH FUTURE AND PROMOTING A SAFE AND VIBRANT ISRAEL ARE THE ENDURING CORNERSTONES OF OUR WORK WE ENGAGE THE COMMUNITY BY PROVIDING ROBUST SERVICE AND VOLUNTEER OPPORTUNITIES, COMBATING ILLITERACY, FIGHTING HUNGER, SHAPING POLICY AND ADVOCATING FOR ISRAEL TOGETHER AS A COMMUNITY, AND WITH DIVERSE PARTNERS ACROSS LOS ANGELES, WE CAN SHAPE THE FUTURE

# 990 Schedule O, Supplemental Information Return Reference Explanation

LES BIDER AND LYNN BIDER HAVE A FAMILY RELATIONSHIP. DEREK BROWN AND LYNETTE BROWN HAVE A

PART VI, SECTION A, LINE 2

FAMILY RELATIONSHIP, RODNEY FREEMAN AND HEIDI MONKARSH HAVE A FAMILY RELATIONSHIP, LISA HE SS AND GEORGE HESS HAVE A FAMILY RELATIONSHIP, ADA HORWICH AND ARI EISENBERG HAVE A FAMILY RELATIONSHIP, LEON JANKS AND SHARON JANKS HAVE A FAMILY RELATIONSHIP, AND FRANK MAAS AND VIRGINIA MAAS HAVE A FAMILY RELATIONSHIP FORM 990, PART VI, SECTION A, LINE 6 DESCRIPTION OF MEMBERS AND STOCKHOLDERS MEMBERS ARE DEFINED AS CONTRIBUTORS WHO HAVE PAID NOT LESS TH AN \$100 TO THE ANNUAL COMMUNITY-WIDE FUND RAISING CAMPAIGN WITHIN THE TWELVE MONTHS PRECED ING THE DATE OF A MEMBERS MEETING

FORM 990.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS OR STOCKHOLDERS WHO MAY ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY MEMBERS OF THE FEDERATION CONVENE AT LEAST BIENNIALLY (BIENNIAL MEETING) AND OTHERWISE AS DEEMED NEC ESSARY BY THE BOARD OF DIRECTORS OR CHAIR ONE HUNDRED MEMBERS CONSTITUTE A QUORUM AT A ME ETING OF THE MEMBERS MEMBERS ARE NOT ENTITLED TO VOTE OR ACT BY PROXY ONLY MATTERS OF WH ICH NOTICE WAS GIVEN MAY BE ACTED UPON AT A MEMBERS MEETING THE AGENDA OF THE BIENNIAL ME ETING SHALL INCLUDE THE ELECTION OF DIRECTORS PURSUANT TO THE BYLAWS MEMBERS SHALL ELECT DIRECTORS FOR A TWO-YEAR TERM AT THE BIENNIAL MEETING PRIOR TO THE BIENNIAL MEETING, THE NOMINATIONS COMMITTEE COORDINATES THE SELECTION OF PROPOSED DIRECTORS IN ACCORDANCE WITH THE PROCEDURES ENUMERATED IN THE BYLAWS VACANCIES CREATED BY RESIGNATION, DEATH, INCAPACIT Y OR OTHER DEPARTURE OF A DIRECTOR MAY BE FILLED BY THE CHAIR'S APPOINTMENT, FOR THE UNEXPIRED PORTION OF THE TERM, SUBJECT TO APPROVAL BY VOTE OF THE BOARD AT THE NEXT BOARD MEETING A REPLACEMENT DIRECTOR MAY SERVE ON THE BOARD BY THE CHAIR'S APPOINTMENT ON AN INTERIM BASIS UNTIL SUCH NEXT BOARD MEETING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	PROCESS TO REVIEW THE FORM 990 THE FORM 990 IS PREPARED BY THE FEDERATION'S FINANCE STAFF A PUBLIC ACCOUNTING FIRM IS RETAINED TO PROVIDE TAX SERVICES FOR THE FEDERATION WHEN THE FORM 990 IS COMPLETE, BUT BEFORE IT IS FILED, THE AUDIT COMMITTEE MEETS WITH THE CFO AND VP OF FINANCE AND REPRESENTATIVES FROM THE PUBLIC ACCOUNTING FIRM TO PERFORM A THOROUGH RE VIEW OF THE FORM 990 THE BOARD HAS EMPOWERED THE AUDIT COMMITTEE TO PERFORM THIS REVIEW OF THE FORM 990 PRIOR TO FILING, THE MEMBERS OF THE BOARD OF DIRECTORS ARE PROVIDED AN ELECTRONIC COPY OF THE FORM 990 FOR REVIEW

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY THE JEWISH FEDERATION HAS A WRITTEN CONFLICT OF INTEREST POLIC Y BOARD MEMBERS, COMMITTEE MEMBERS, OFFICERS, KEY EMPLOYEES AND SELECTED STAFF ARE SUBJEC T TO COMPLIANCE WITH THE POLICY THE POLICY IS POSTED ON THE ORGANIZATION'S INTRANET ADDI TIONALLY, THE POLICY IS CIRCULATED ON AN ANNUAL BASIS TO AFFECTED PERSONS ALONG WITH A QUE STIONNAIRE TO FURTHER IDENTIFY RELATIONSHIPS THAT REQUIRE DISCLOSURE ON THE FORM 990. THE POLICY DEFINES PROCEDURES FOR THE CONFLICTED PERSON AND/OR OTHERS TO ENSURE THAT BUSINESS TRANSACTIONS ARE IN THE BEST INTEREST OF THE ORGANIZATION, BUSINESS AND FAMILY RELATIONSHI PS ARE FULLY DISCLOSED, AND DISCIPLINARY MEASURES ARE ENFORCED WHEN A POTENTIAL CONFLICT OF INTEREST IS IDENTIFIED BY THE CONFLICTED PARTY OR THE JEWISH FEDERATION, THE NATURE OF THE INTEREST OR INVOLVEMENT IS IMMEDIATELY COMMUNICATED TO THE PRESIDENT, BOARD CHAIR, AND THE RESPECTIVE COMMITTEE CONSIDERING THE TRANSACTION IF THE PARTICULAR TRANSACTION REQUI RES A VOTE, THE CONFLICTED PARTY SHALL NOT BE COUNTED FOR PURPOSES OF A QUORUM NOR SHALL H E OR SHE VOTE ON THE MATTER PERSONS PREPARING AND SIGNING THE FORM 990 ARE FAMILIAR WITH BOARD MEMBERS, COMMITTEE MEMBERS, FINANCIAL TRANSACTIONS (INCLUDING CONTRACTUAL ARRANGEMEN TS) AND THE RULES AND POLICIES RELATED TO CONFLICTS OF INTEREST

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	PROCESS FOR DETERMINING EXECUTIVE COMPENSATION THE BYLAWS PROVIDE FOR AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE WHICH REVIEWS AND APPROVES THE COMPENSATION, INCLUDING BENEFIT S, OF THE PRESIDENT/CHIEF EXECUTIVE OFFICER, CHIEF OPERATING AND FINANCIAL OFFICER, EXECUTIVE VICE PRESIDENTS CHIEF DEVELOPMENT OFFICER AND DIRECTOR OF VALLEY ALLIANCE, AND OTHER S ELECTED EMPLOYEES WHO COMPRISE THE FIVE HIGHEST PAID EMPLOYEES OF THE FEDERATION THE REVIEW AND APPROVAL PROCESS INCLUDES ENGAGING AN OUTSIDE CONSULTANT WHO USES SALARY SURVEYS AND STUDIES OF NON-PROFIT ORGANIZATIONS TO PROPOSE A COMPENSATION PACKAGE THE REVIEW AND APPROVAL OCCUR UPON HIRING OF THE OFFICER, RENEWAL OR EXTENSION OF THE EMPLOYEE'S EMPLOYMENT AGREEMENT, OR WHEN THE COMPENSATION IS MODIFIED AFTER THE EXECUTIVE COMPENSATION COMMITTEE HAS SETTLED ON A COMPENSATION MATTER, THE RESULTS ARE REPORTED TO THE BOARD THE COMPENSATION OF THE CURRENT CHIEF EXECUTIVE OFFICER WAS APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE IN 2009, 2012, 2015, AND AGAIN IN 2017 AS PART OF THE RENEWAL OF HIS EMPLOYMENT A GREEMENT

Return

Deference

Reference	
FORM 990,	PUBLIC INSPECTION OF DOCUMENTS THE JEWISH FEDERATION MAKES ITS GOVERNING DOCUMENTS AVAILAB
PART VI,	LE FOR INSPECTION AT THE OFFICE OF THE ORGANIZATION THE JEWISH FEDERATION MAKES ITS CONFL
SECTION C,	ICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION AT THE OF
LINE 19	FICE OF THE ORGANIZATION, AND COPIES WILL BE PROVIDED ON REQUEST IF THEY CANNOT BE ACCESSE
	D FROM THE PUBLIC WEBSITE

Explanation

efile GRAPHIC print - DO	NOT PROCESS As Filed Data -										DLN: 93493	319080	948
SCHEDULE R (Form 990)	Related O	_	swered "Yes	on Form	n 990, Part		_		37.		20	1545-004 17	<del>1</del> 7
Department of the Treasury Internal Revenue Service	▶ Information about So	hedule I	► Attach to R (Form 990)			s is at <u>www</u>	irs.gov/f	orm99	<u>o</u> .		Open to	o Public ection	C
Name of the organization JEWISH FEDERATION COUNCIL OF G	CDEATED IA							Emp	loyer identif	icatior	n number		
JEWISHTEDERATION COUNCIL OF C	INCATEN DA							95-1	643388				
Part I Identification	of Disregarded Entities Complete if the	e organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
Name, address, and	(a) EIN (If applicable) of disregarded entity		(b) Primary a		Legal dom	c) nicile (state n country)	(d) Total inco	ome	<b>(e)</b> End-of-year as	sets	<b>(f</b> Direct co ent	ntrolling	
related tax-exen	of Related Tax-Exempt Organizations npt organizations during the tax year.	Comple	te if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more	
See Additional Data Table  Name, address, an	(a) d EIN of related organization	Prim	<b>(b)</b> ary activity	Legal dom	<b>c)</b> nicile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dii	<b>(f)</b> rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?
												Yes	No
				<u> </u>								-	
For Panerwork Reduction Ac	t Notice, see the Instructions for Form 99	0		Ca	t No 5013	<u> </u> 				Sche	edule R (Form	990) 20	117

(a) Name, address, and EIN of related organization		related organization activity domicile co		(d) Direct controlling entity	(e) Predominant Income(related unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	allocations?		Dispropi	Disprop	Disprop alloca	rtionate	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	alor P ging c	(k) ercent owners
								Yes	No		Yes	No					
Identification of Related Organ because it had one or more related						l zation ansv	l vered "Yes	l " on Fo	orm 99	l 90, Part IV,	line .	34					
( <b>a)</b> Name, address, and EIN of related organization	(b) Primary activity	do do (state	(c) _egal omicile or foreign		entity (C ci	(e) e of entity orp, S corp, or trust)	(f) Share of total Income	Share	(g) of end- year assets	of- Percei owne	ntage	(13)	(ı) tion 5 cont				
		со	untry)									Υe	es				
										1							
													4				
													+				
													$\perp$				

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	Г		T
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	. 1	a Yes	
<b>b</b> Gift, grant, or capital contribution to related organization(s)	. 1	b	No
c Gift, grant, or capital contribution from related organization(s)	. 1	c Yes	
d Loans or loan guarantees to or for related organization(s)	<del></del>	d	No
e Loans or loan guarantees by related organization(s)	1.	e	No
f Dividends from related organization(s)	1	f	No
g Sale of assets to related organization(s)	1.	g	No
h Purchase of assets from related organization(s)	11	h	No
i Exchange of assets with related organization(s)	1	i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1	j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1	k	No
I Performance of services or membership or fundraising solicitations for related organization(s)	1	ı	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1	m	No
	-	- V	+-

Page 3

Literating of assets with related organization(s)	1 1	- 1	
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
	Ш		
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q Reimbursement paid by related organization(s) for expenses	1q	Yes	

1r No 1s No 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds See Additional Data Table (a) Name of related organization (d) Method of determining amount involved (b) (c) Transaction Amount involved type (a-s)

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

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

was not a related organization. See instructions regarding exclusion for certain investment partnerships													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017

### Software ID: Software Version:

**EIN:** 95-1643388

Name: JEWISH FEDERATION COUNCIL OF GREATER LA

Form 990, Schedule R, Part II - Identification of Related			735	1 7-3	1 70	1 ,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	<b>(f)</b> Direct controlling entity	Section (b)( contro	n 512 13) olled ty?
	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes Yes	No
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 05-0545566	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 33-0782972	GENERAL SOFT		301(0)(3)	12, 1	<b>JC</b> 1	163	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4199489 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4700852	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4068700							
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4105774	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4684563	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 01-0734263	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4582899 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4095134 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4830603	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4092926							
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4088934	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4364781 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
68-0517051 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4092908 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
95-4095677  6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4455777	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 68-0493061	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 26-1573706	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes	

Form 990, Schedule R, Part II - Identification of Relate (a)	d Tax-Exempt Organiz	ations (c)	(d)	(e)	(f)	(g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c) (3))	Direct controlling entity	Section 512 (b)(13) controlled entity?
	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes No
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 02-0778652						
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4826900	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 80-0143565	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 03-0576686	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
95-4773791 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
95-4250205 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
35-2303167 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
95-4717551 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 56-2669586	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-3924344	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
95-4621783 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4246144	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4651913	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4716089	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4556596	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4871770	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-4571058	GENERAL SUPT	CA	501(C)(3)	12, 1	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-3507310	GENERAL SUPT	CA	501(C)(3)	PF	JCF	Yes
6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 90048 95-6111928	GENERAL SUPT	CA	501(C)(3)	7	JFC	Yes

(b) (c) Name of related organization Amount Involved (d) Transaction type(a-s) Method of determining amount involved 4,244,399 FMV JEWISH COMMUNITY FDN OF LA С JEWISH COMMUNITY FDN OF LA 324,798 FMV а NEWTON D & ROCHELLE F BECKER FDN 100,000 FMV С FMV NIZNICK FAMILY FOUNDATION 125,000 С THE GOREN FAMILY FOUNDATION 63,050 FMV FMV THE JUDY & BERNARD BRISKIN FAMILY FDN 302,500 С THE MARK SCHULMAN & ESTHER SCHULMAN FDN 75,000 FMV C FMV THE PALERMO-RAVICH FOUNDATION 100,000 FMV THE PEPP FAMILY SUPPORT FOUNDATION 203,500 С

60,500

100,000

С

FMV

FMV

Form 990, Schedule R, Part V - Transactions With Related Organizations

THE TOM & SONDRA RYKOFF FAMILY FDN

THE ZIERING FAMILY FOUNDATION