Return of Organization Exempt From Income Tax

EXTENDED TO JULY 15, 2019 29493208046072.9

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

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

Inspection

AI	FCF the	e 2017 calendar year, or tax year beginning SEP 1, 2017 and ending	J A	UG 31, ZUI	. 0		
В	Check if applicabl	C Name of organization		D Employer iden	tıficatıo	n number	
	Addre	MINNEAPOLIS JEWISH FEDERATION					
	Name chang	e Doing business as		41-	-0693	3866	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite	E Telephone num			
	Final return.			952		3-2600	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		39,637,	, <u>385</u> .
	Ameno return	MINNETONKA, MN 55305		H(a) Is this a group	p return	I	
	Application	F Name and address of principal officer PLAKTIN K. DIFORUIA		for subordina	tes?	Yes	X No
	pendir	SAME AS C ABOVE		H(b) Are all subordinate	es included	d? Yes	No No
		empt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	f "No," attacl	n a list.	(see instructi	ons)
		te: WWW.JEWISHMINNEAPOLIS.ORG		H(c) Group exemp	ition nu	mber 🕨	
			Year o	f formation: 1930	M Sta	ite of legal don	nıcıle: MN
Pa	art I	Summary		<u> </u>			
•	1	Briefly describe the organization's mission or most significant activities SEE SCHE	DUI	LE O			
Activities & Governance							
E	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore t	han 25% of its net	assets.		
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3		35
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4		35
ŝ	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			5		81
į	6	Total number of volunteers (estimate if necessary)			6		750
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		<u> </u>	7a	-198,	870 .
_ <	b	Net unrelated business taxable income from Form 990-T, line 34			7b	-199,	870.
				Prior Year		Current Ye	ear
Revenue	8	Contributions and grants (Part VIII, line 1h)		<u>21,421,022</u>		23,896,	026.
	9	Program service revenue (Part VIII, line 2g)		0	•		0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,398,555	•	4,407,	907.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		350,787	•	421,	570.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		25,170,364		28,725,	503.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		10,298,237	. 1	10,823,	161.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	•		0.
ý	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,479,293	•	2,936,	897.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	•	3,	616.
De l	ь	Total fundraising expenses (Part IX, column (D), line 25) \(\bigs \) 1,958,759.					
ũ	1 7	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,709,758	•	3,122,	315.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A)口便到EIVED		15,487,288	. 1	16,885,	989.
	19	Revenue less expenses Subtract line 18 from line 12		9,683,076	. 1	11,839,	514.
Sec		[7] ALL COLOR 17]	Beg	inning of Current Yea	ır	End of Ye	ar
sets	20	Total assets (Part X, line 16)	11:	38,798,848	. 15	57,165,	541.
ABS	21	Total liabilities (Part X, line 26)		<u>42,452,166</u>		46,097 <u>,</u>	<u>255.</u>
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20 OGDEN UT	1 9	96,346,682	. 11	11,068,	286.
Pa	ırt II	Signature Block	<u> </u>				
		lties of perjury, I declare that I have examined this return, including accompanying schedules and sta			my knov	vledge and bel	ief, it is
true,	correc	t, and complete Declaration of preparer (afte r than of ficer) is based on all information of which prep	oarer h	as any knowledge./			
		millian (Shalles		7/15/19	<u> </u>		
Sigr	n	Signature of Officer		Dafe / '			
Her	e	MARTIN K. LIPSHUTZ, COO/CFO					
		Type or print name and title					
		Prigt/Type preparer's name Preparer's signature	/	ate Check		PTIN *	
Paid		LAWRENCE H. MOHR, CPA James H. W.	<u>ر</u> 0:	7/15/19 self-em	ployed I	P004476	03
Prep	arer	First's name BAKER TILLY VIRCHOW KRAUSE, LLP		Firm's EIN		9-08599	
	Опју	Fight's address 225 S 6TH ST #2300					
		MINNEAPOLIS, MN 55402		Phone no. 6	12.8	376.450	0
May	the IF	3S discuss this return with the preparer shown above? (see instructions)		1		X Ves	No.

Form:	990 (2017) MINNEAPOLIS JEWISH FEDERATION	41-0693866	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	MINNEAPOLIS JEWISH FEDERATION IS A NONPROFIT ORGANIZATION	THAT	
	PROMOTES A CULTURE OF PHILANTHROPY, LEVERAGES RESOURCES	O MEET LOC.	AL
	AND GLOBAL JEWISH NEEDS, AND FACILITATES COMMUNITY PLANN		
	A THRIVING AND SECURE FUTURE.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		s X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y€	s X No
_	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	neasured by expense	s
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 13,028,672. including grants of \$ 10,823,161.) (Revenue	e \$	0.)
	MINNEAPOLIS JEWISH FEDERATION IS A FEDERATED FUNDRAISER S		
	PROGRAMS THAT BENEFIT APPROXIMATELY 33,000 JEWS IN THE GR	REATER	
	MINNEAPOLIS AREA AND IN NATIONAL AND INTERNATIONAL COMMUN		
	FEDERATION RAISES FUNDS THROUGH ANNUAL AND DIRECTED CAMPA		
	PROVIDE MONIES FOR BENEFICIARY AGENCIES TO BUILD NEW AND		
	EXISTING PROGRAMMING AND INFRASTRUCTURES IN THE GREATER M		
	JEWISH COMMUNITY. ADDITIONALLY, GRANTS ARE MADE TO VARIOUS		
	THROUGHOUT THE UNITED STATES AND THE WORLD THROUGH ADVISI		<u> </u>
	RECOMMENDATIONS AND GRANTS TO BENEFICIARY ORGANIZATIONS		RT.
	OF THE JEWISH COMMUNITY FOUNDATION, THE PLANNED GIVING A		
	DEPARTMENT OF MINNEAPOLIS JEWISH FEDERATION. FOR MORE IN		
			<u>ON</u>
41	THE IMPACT MINNEAPOLIS JEWISH FEDERATION HAS HAD ON THE		
4b	(Code) (Expenses \$	e \$	······································
		-	
			
		·-	
4c	(Code) (Expenses \$ including grants of \$) (Revenue	e\$)
			·
			/
	Other and the Company of Company		
4d	Other program services (Describe in Schedule O)	,	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 13,028,672.		
<u>4e</u>	Total program service expenses ► 13,028,672.		n 990 (2017)
		Form	1330 (2017)

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X٠	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	L
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		`	
	public office? If "Yes," complete Schedule C, Part I	3	L	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_	X	ļ
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ĺ		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		^
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes." complete Schedule D. Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	-		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	├ `		
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b	х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		[
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	·	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		v	
_	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		х	
6	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
6		40	·	Х
7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
•	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''-		
•	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	13		
_	complete Schedule G. Part III	19		Х
_	Maria		990	

Form **990** (2017

Yes No

Partily Checklist of Required Schedules (continued)

b If "vest to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic government on Part IX, column (A), line 1? "If "ves," complete Schedule I, Parts I and III Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 1? "If "ves," complete Schedule I, Parts I and III Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2" if "Yes," complete Schedule I, Parts I and III Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? "If "Yes," answer lines 24b through 24d and complete Schedule I/ Who, go or line accord assistance of the security of the organization nevers are associated to the than a refunding secrow at any time during the year? 24d	20a	Did'the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
domestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II 2 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 2 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 ingrise compensated employees? If "Yes," complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I. Part I was exempt bonds? 2 Did the organization minest any proceeds of tax exempt bonds beyond a temporary period exception? 2 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 2 Did the organization maintain an escrow account other than a refunding escrow at any time during the year? to defease any tax exempt bonds? 2 Did the organization and a san "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax exempt bonds? 2 Did the organization and a san "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax exempt bonds? 3 Sections 05(0(3), 501(0(4)), and 501(0(29) organizations.) but the organization engage in an excess benefit transaction whith a dequalified person in a prior year, and that the transaction has not been reported on any of these persons? If "Yes," complete Schedule I, Part II 2 Did the organization export any amount on Part X line 5, 6, or 22 for receivables from or pasyables to any current or former officer, director, trustee, or well-persons or disqualified person in a prior year, and that the transaction has not been reported on any of these persons? If "Yes," compl	b	·	20b		
22 Death organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If Yes, "complete Schedule I, Parts I and III 2. In the organization answer "Yes" to Part IVI, Socious A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If Yes," complete Schedule Is Schedule Is Yes, I Yes, "complete Schedule Is Yes," to be the organization answer was sessed after December 31, 2002? If Yes, "answer ines 24th through 24th and complete Schedule Is Yes," or In Internation in the session of the last day of the year, that was issued after December 31, 2002? If Yes, "answer ines 24th through 24th and complete Schedule Is I Yes," or In Internation Internati	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), the 2" if "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. A Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II" "I'mo", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any are operated or any tax-exempt bonds? Did the organization are cas an "on behalf of" issuer for bonds outstanding at any time during the year? Section 50 (Ic(3), 50 (Ic(4), and 50 (Ic(32) organizations). Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II Did the organization aware that the engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part II Did the organization are provide a grant or other assistance to an officer, director, trustee, in a straight of the organization are provided as a grant or other assistance to an officer, director, trustee, eye employee, substantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employees (ir a family member director), which a current or former officer, director, trustee, or key employees (ir a family member thereof) was an officer, director, trustee, or key employees (ir a family member thereof) was an officer, director, trustee, or key employees (ir a family member thereof) was an officer, director, trustee, or key employees (ir a family member thereof) was an officer		domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	Х	
Did the organization answer "Yes" to Part VII, Section A, Inine 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is at day of the year, that was issued after Docember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is If "No", go to line 25a. 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 Docember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is Old the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? to year. Complete Schedule L, Part I be to organization with a disqualified person during the year? if Yes, "complete Schedule L, Part I be to organization and year and that the transaction with a disqualified person during the year? if Yes, "complete Schedule L, Part I be of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, finates, key employees, highest compensated employees, or disqualified persons? If Yes, "complete Schedule L, Part IV be A family member of any of these persons? If Yes, "complete Schedule L, Part IV be A family member of any of these persons? If Yes, "complete Schedule L, Part IV be A nemtly of which a current or former officer, director, frustee, or key employee? If Yes, "complete Schedule L, Part IV be A nemtly of which a current or former officer, director, frustees,	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Did the organization have a tax exempt bond issue with an outstanding prinoipal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K "Two", go to the 25a Did the organization inwest arry proceeds of tax exempt bonds beyond a temporary pende exception? 24b Did the organization inwest arry proceeds of tax exempt bonds beyond a temporary pende exception? 25c Did the organization inwest arry proceeds of tax exempt bonds beyond a temporary pende exception? 25d Did the organization inwest arry proceeds of tax exempt bonds outstanding at any time during the year to defease any tax exempt bonds? 25d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax exempt bonds? 25d Section 50(16g), 50(10g), and 50(10g) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of the organization with a disqualified person of the section of the temporary pende schedule L, Part II 25d Did the organization aware that the qagaged in an excess benefit transaction with a disqualified persons? If "Yes," complete Schedule L, Part IV 25d 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, exemptoyees, prightest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 27d Did the organization provide a grant or or other assistance to an officer, director, trustee, key employee, substantial contribution or aparty to a business transaction with one of the following parties (see Schedule L, Part IV 27d Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete		Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	Х	
Schedule J. 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the liat day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds. Did the organization amaintain an escrow account other than a refunding escrow at any time during the year? did the organization and that a disqualified person during the year? did the organization area that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II b is the organization aware that it engaged in an excess benefit transaction with a disqualified person on any of the organization's prior Former on an excess benefit transaction with a disqualified person on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is provided. Part II Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, or the year year, and the properties of any of these persons? If "Yes," complete Schedule L, Part IV 25b Schedule L, Part II 27c Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV A mentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive any t	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a bid the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule It. "No", go to time 25s bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? d) bid the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year? of the organization with a disqualified person during the year? (""'es," complete Schedule L, Part I bid the organization with a disqualified person of unity that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? ("Yes," complete Schedule L, Part I) bid 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, leavy employees, highest compensated employees, or disqualified persons? ("Yes," complete Schedule L, Part IV and the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? ("Yes," complete Schedule L, Part IV and the organization receive more than \$25.000 in non-cash exceptions) a A current or former officer, director, trustee, or key employee? ("Yes," complete Schedule L, Part IV and the organization receive more than \$25.000 in non-cash contributions? ("Yes," complete Schedule L, Part IV and the organization receive more than \$25.000 in non-cash contributions? ("Yes," complete Schedule L, Part IV, IV and Part IV, IV and Part IV, IV and Part IV,		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	:		
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 5.4b b Did the organization maintain an escribe account other than a refunding escribe any tax exempt bonds. Did the organization maintain an escribe account other than a refunding escribe any tax exempt bonds. 24b 24c 24b 22c 3c		Schedule J	23	X	
Schedule K. If "No", go to line 25a b. Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c. Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c. Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization avaire that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 990 or 990-E27. If "Yes," complete Schedule L, Part I 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, elsey employees, indigest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 29 Was the organization receive and fine of the organization receive contributions of an historical researce, or other similar assets, or qualified conservation contributions? If "Yes," complete Sc	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
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Yes No No No No No No No N	Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V					
1s Enter the number reported in Box 3 of Form 1096 Enter 4-0, fron applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) withings to prize winners? Enter the number of empty sees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return If all seal are is reported on line 22, did the organization file all regular dideral employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If all seal are is reported on line 22, did the organization file all regular dideral employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of lines 1s and 2s is greater than 250, you may be required to e-the (see instructions) If the view of the complete the contribution and present in a case of the foreign accountry with the organization appropriation that a such contributions and present that such contributions or grifts were not tax deductible? If the view of the organization has that are normally greater than \$100,000, and did the organization sclick and you were not tax deductible? If the organization received a contribution of qualified intellectual property, did the organization file a form 1995 or the vehi		The chief it schedule of contains a response of note to any line in this part v		· · · · ·		V	
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a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b		sponsoring organization have excess business holdings at any time during the year?			8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter. a 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 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b		, , ,					<u> </u>
a 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 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13c 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b							
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b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13b Is Interest the amount of reserves any payments for indoor tanning services during the tax year? 14a X 15b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			112				
amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O			· · · ·				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	-	· · · · · · · · · · · · · · · · · · ·	11b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	12a	·		1	12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13b 13b 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a	13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
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 c Enter the amount of reserves on hand 13c 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15c 16c 17c 18c 18c 18c 18c 18c 18c 18		Note. See the instructions for additional information the organization must report on Schedule O					
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b	b	Enter the amount of reserves the organization is required to maintain by the states in which the					ı
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b		organization is licensed to issue qualified health plans	13b				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	С	Enter the amount of reserves on hand	13c				
							<u> </u>
	b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedul	e O			000	

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1			
	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 1b 35			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	х	
7a	-	•		
74	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	- -	х	
	more members of the governing body?	7a	^	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
_	persons other than the governing body?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	<u> </u>	Ţ	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			37
800	organization's mailing address? f "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	- 1		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
Ь	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		<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		7,]
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			ł
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	_X_	
b	Other officers or key employees of the organization	15b		<u> </u>
	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MN , CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) av	aılable		
	for public inspection. Indicate how you made these available. Check all that apply			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	inancı	al	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MARTIN LIPSHUTZ - 952-417-2317			
	111 CHESHIRE LANE, SUITE 50, MINNETONKA, MN 55305			

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson ı	s both	n an	compensation	compensation	amount of
	week (list any	_	T				100,	from the	from related organizations	other compensation
	hours for	director				~		organization	(W-2/1099-MISC)	from the
	related	trustee or	ıstee			nsate		(W-2/1099-MISC)	(** =* ********************************	organization
	organizations	l trus	Institutional trustee		Key emptoyee	Highest compensated employee				and related
	below	Individual	htutio	Officer	E E	hest c	ᇣ			organizations
	line)	틸	_isi)HO	ē.	₹8	Ē			
(1) HOWARD ZACK	20.00									
PRESIDENT		X	<u> </u>	X		_		0.	0.	0.
(2) TODD LEONARD	5.00			, ,						_
PRESIDENT ELECT		X	<u> </u>	X		_		0.	0.	0.
(3) DAVID ORBUCH	1.00	,,		١,,						
IMMEDIATE PAST PRESIDENT		X		X			_	0.	0.	0.
(4) BRADLEY BIRNBERG	2.00			.,					0	•
TREASURER (5) SANDY DONALDSON	1.00	X		X				0.	0.	0.
(5) SANDY DONALDSON ASSISTANT TREASURER		v		х				0.	_	0
(6) MARK APPELBAUM	0.00	X				\vdash		0.	0.	0.
SECRETARY	1.00			x				0.	0	^
(7) BRIAN LIPSCHULTZ	1.00	X		^				0.	0.	0.
DIRECTOR	0.00	x						0.	0.	0.
(8) DAVID PARISH	1.00	Ĥ	\vdash	\vdash			┝	0.	0.	
DIRECTOR	0.00	x						0.	0.	0.
(9) SANDY SONDELL	1.00							•	•	<u> </u>
DIRECTOR	0.00	X						0.	0.	0.
(10) JACY GRAIS	1.00	 				\vdash			<u> </u>	•
DIRECTOR	0.00	x						0.	0.	0.
(11) JASON GRAIS	1.00				<u> </u>					
DIRECTOR		x						0.	0.	0.
(12) JONATHAN HALPER	1.00								-	
DIRECTOR		x			ļ			0.	0.	0.
(13) ANDREW PARKER	1.00	1								
DIRECTOR		x						0.	0.	0.
(14) ANDREW WIEBERDINK	1.00									
DIRECTOR	0.00	x						0.	0.	0.
(15) DANIEL LIEBERMAN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(16) DAVID SEGAL	1.00									
DIRECTOR	1.00	X				L		0.	0.	0.
(17) GREG ARENSON	1.00									
DIRECTOR	0.00	Х		1 1	l	ı		0.	0.	0.

732007 11-28-17

Part VII Section A. Officers, Directors, 1		oloy	ees,			ghes	t C	ompensated Employee	s (continued)	
· (A)	(B)			(((D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck r			one	Reportable	Reportable	Estimated
	hours per week		, unle: cer an					compensation	compensation	amount of
	(list any	⊢					, 	from the	from related	other
	hours for	director				_		organization	organizations (W-2/1099-MISC)	compensation from the
	related	5 8	trustee)sate		(W-2/1099-MISC)	(** 27 1000 141100)	organization
	organizations		al tru		yee	adwo		(** =: *********************************		and related
	below	Individual	Institutional	نة	old m	est co oyee	ler			organizations
	line)	횰	Instr	Officer	Key employee	Highest compensated employee	Former			
(18) HOWARD MILSTEIN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(19) JOSH ZAMANSKY	1.00	ļ							1	
DIRECTOR	0.00	X						0.	0.	0.
(20) LEV BUSLOVICH	1.00									
DIRECTOR	0.00	X						0.	0.	_ 0.
(21) MARK ADELMAN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(22) RORY ZAMANSKY	1.00									
DIRECTOR	0.00	X						_ 0.	0.	0.
(23) STEVEN HUNEGS	1.00									
DIRECTOR	0.00	X						0.	0.	0
(24) STEVEN MACHOV	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(25) STUART GOLDENBERG	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(26) DANA PROTTAS	1.00									
DIRECTOR	0.00	X						0.	0.	0.
1b Sub-total							▶	0.	0.	0.
c Total from continuation sheets to Par	t VII, Section A						•	437,133.	0.	41,624.
d Total (add lines 1b and 1c)							•	437,133.	0.	41,624.

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

- Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

l l	3		X	
	4	Х		
Ĺ				
	5		X	

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
STINSON LLP, 50 SOUTH SIXTH ST, STE 2600, MINNEAPOLIS, MN 55402	LEGAL SERVICES	769,345.
		. ~

\$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 MINNEAPO									41-069	<u> 3866 </u>
Rart VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, aı	nd H	ligh	est (Compensated Employe	es (continued)	
` (A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average			Pos		ı		Reportable	Reportable	Estimated
Tamb and the	hours (check all that apply)								compensation	amount of
	per	<u> </u>	T			Ė	Ϊ	compensation from	from related	other
	week					- B		the	organizations	compensation
	(list any	ctor				월		organization	(W-2/1099-MISC)	from the
	hours for	Į į				ted e		(W-2/1099-MISC)		organization
	related	Stee (ruste			bensa				and related
	organizations	la Itu	l E	i i	ploye	5	ĺ			organizations
	below	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	٤	È	ō	Ke	로	- B	·		
(27) DEBBIE GOLDENBERG	1.00			<u> </u>						
DIRECTOR	0.00	X	┞	Щ		<u> </u>	_	0.	0.	0.
(28) DORI WEINSTEIN	1.00							_		_
DIRECTOR	0.00	X				L		0.	0.	0.
(29) KRISTINE MACDONALD	1.00									
DIRECTOR	0.00	X	L					0.	0.	0.
(30) LINDA FITERMAN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(31) SUSAN YOST	1.00									
DIRECTOR	0.00	х						0.	0.	0.
(32) ARIELLE KAUFMAN	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(33) NOAM JAFFA	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(34) JILL CRIMMINGS	1.00									
DIRECTOR	0.00	х						0.	0.	0.
(35) MAX DAVIS	1.00							<u> </u>		
DIRECTOR	0.00	х						0.	0.	0.
(36) JAMES COHEN	40.00		_							
CHIEF EXECUTIVE OFFICER - PART YEAR	1.00			х				139,274.	0.	7,418.
(37) MYRA GIESENER	40.00									
CHIEF OPERATING OFFICER - PART YEAR	1.50			x				225,515.	0.	26,517.
(38) MARTIN LIPSHUTZ	40.00		_							
COO/CFO - PART YEAR	1.50			x				21,857.	0.	1,009.
(39) HEATHER RING	40.00									
CHIEF DEVELOPMENT OFFICER- PART YEAR	0.00			x				50,487.	0.	6,680.
	0.00	 			_			307107		0,000
										
		_	\vdash							
		_	-	Н		-				
]]		
	-		\vdash	Н	_					<u> </u>
		_		Н	-				<u> </u>	
										
	 	<u> </u>	-	\vdash	\vdash	\vdash				
	<u> </u>									
	 			Н		\vdash				<u> </u>
	<u> </u>			L			Ц.,			
_								425 422		41 604
Total to Part VII, Section A, line 1c			_					437,133.		41,624.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections
512 - 514 (B) (C) Related or Unrelated Total revenue exempt function business revenue revenue 3,493. 1 a Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts. 1b **b** Membership dues 1c c Fundraising events 181,000. d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and 23,711,533. similar amounts not included above 5,579,724 g Noncash contributions included in lines 1a-1f \$ 23,896,026 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and -198,870 1,899,796. 1,700,926. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities 13,618,863. assets other than inventory b Less cost or other basis 10,907,479. 4,403 and sales expenses -4,403. 2,711,384. c Gain or (loss) 2,706,981. 2,706,981. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a REGISTRATION FEES 900099 291,736 291,736. 67,327. b MISSIONS INCOME 900099 67,327 900099 62,507. 62,507. MISCELLANEOUS INCOME d All other revenue 421,570 Total. Add lines 11a-11d -198,870. 5,028,347. 28,725,503. 0. Total revenue See instructions

Form 990 (2017) MINNEAPOLIS JEWISH FEDERATION Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	7 605 751	7 605 751		
_	and domestic governments. See Part IV, line 21	7,695,751.	7,695,751.		···
2	Grants and other assistance to domestic	222 011	222 011		
_	individuals See Part IV, line 22	222,811.	222,811.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	2 004 E00	2 004 500		
	individuals See Part IV, lines 15 and 16	2,904,599.	2,904,599.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	544 ³ 012	010 006	04 000	0.41 0.00
	trustees, and key employees	544,013.	218,826.	84,088.	241,099
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				· · · · · · · · · · · · · · · · · · ·
7	Other salaries and wages	1,985,737.	798,752.	306,932.	880,053
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	51,920.	17,111.	16,678.	18,131
9	Other employee benefits	175,383.	84,391.	40,471.	50,521
10	Payroll taxes	179,844.	73,703.	26,318.	79,823
11	Fees for services (non-employees)				
а	Management				
b	Legal	542,897.	2,868.	265,665.	274,364
С	Accounting	51,964.	4,291.	34,800.	12,873
d	Lobbying		-	·	•
е	Professional fundraising services. See Part IV, line 17	3,616.			3,616
f	Investment management fees				- ,
	Other (If line 11g amount exceeds 10% of line 25,				
3	column (A) amount, list line 11g expenses on Sch O.)	288,550.	7,472.	116,193.	164,885
12	Advertising and promotion	106,622.	39,758.	3,342.	63,522
13	Office expenses	95,231.	29,212.	38,772.	27,247
14	Information technology	30,2021	23,022	3377721	
15	Royalties				
16	· ·	233,715.	65,550.	168,165.	
17	Occupancy	285,843.	281,551.	2,475.	1,817
_	Travel	203,043.	201,331.	2,3130	1,017
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	486,856.	339,549.	24,086.	123,221
19	Conferences, conventions, and meetings	1,407.	333,343.		143,441
20	Interest	1,40/.		1,407.	
21	Payments to affiliates	20 251		20 251	
22	Depreciation, depletion, and amortization	29,251.	4 206	29,251.	
23	Insurance	56,002.	4,296.	44,794.	6,912
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PROVISION FOR BAD DEBTS	623,116.		623,116.	
b	MISCELLANEOUS	274,260.	232,472.	33,716.	8,072
c	EQUIPMENT & REPAIRS	46,601.	5,709.	38,289.	2,603
ď			3,,03.	30,203.	2,003
e	All other expenses				
25	Total functional expenses Add lines 1 through 24e	16,885,989.	13,028,672.	1,898,558.	1,958,759
<u>25</u> 26	Joint costs. Complete this line only if the organization	20,000,000.	10,020,0121	1,000,000	±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
20					
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (201

Paı,	rt X	Balance Sheet							
		Check if Schedule O contains a response or note to any line in this Part X							
	1		(A) Beginning of year		(B) End of year				
	1	Cash - non-interest-bearing	5,244,834.	1	8,083,213.				
	2	Savings and temporary cash investments		2					
	3	Pledges and grants receivable, net	8,549,624.	3	6,023,507.				
	4	Accounts receivable, net		4					
	5	Loans and other receivables from current and former officers, directors,							
	_	trustees, key employees, and highest compensated employees. Complete							
		Part II of Schedule L		5					
	6	Loans and other receivables from other disqualified persons (as defined under							
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing							
		employers and sponsoring organizations of section 501(c)(9) voluntary							
ķ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6					
Assets	7	Notes and loans receivable, net		7_					
Ą	8	Inventories for sale or use		8					
	9	Prepaid expenses and deferred charges		9					
	10a	Land, buildings, and equipment cost or other							
		basis Complete Part VI of Schedule D 10a 393,906.							
	b	Less accumulated depreciation 10b 201,411.	31,518.	10c	192,495.				
	11	Investments - publicly traded securities	101,896,752.	11	103,013,192.				
	12	Investments - other securities See Part IV, line 11	20,495,149.	12	25,177,874.				
	13	Investments - program-related See Part IV, line 11	1,404,337.	13	1,104,233.				
	14	Intangible assets	1 176 634	14	12 571 007				
	15	Other assets See Part IV, line 11	1,176,634.	15	13,571,027.				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	138,798,848.	16	157,165,541.				
	17	Accounts payable and accrued expenses	267,538.	17	287,001.				
	18	Grants payable	11,640,189. 55,015.	18 19	13,093,661. 54,961.				
	19	Deferred revenue	33,013.		34,301.				
	20	Tax-exempt bond liabilities	25,913,663.	20 21	25,139,087.				
	21	Escrow or custodial account liability Complete Part IV of Schedule D	23,713,003.	21	23,133,007.				
ies	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons							
Liabilities		Complete Part II of Schedule L		22					
Lia	23	Secured mortgages and notes payable to unrelated third parties		23					
	24	Unsecured notes and loans payable to unrelated third parties	832,884.	24	1,510,256.				
	25	Other liabilities (including federal income tax, payables to related third							
		parties, and other liabilities not included on lines 17-24) Complete Part X of							
		Schedule D	3,742,877.	25	6,012,289.				
	26	Total liabilities. Add lines 17 through 25	42,452,166.	26	46,097,255.				
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and							
G		complete lines 27 through 29, and lines 33 and 34.							
nce	27	Unrestricted net assets	85,859,571.	27	93,586,031.				
ala	28	Temporarily restricted net assets	6,142,192.	28	3,755,287.				
g p	29	Permanently restricted net assets	4,344,919.	29	13,726,968.				
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here							
ŏ		and complete lines 30 through 34.							
ets	30	Capital stock or trust principal, or current funds		30					
\ss	31	Paid-in or capital surplus, or land, building, or equipment fund		31					
et /	32	Retained earnings, endowment, accumulated income, or other funds	06 046 606	32	111 000 000				
Z	33	Total net assets or fund balances	96,346,682.	33	111,068,286.				
	34	Total liabilities and net assets/fund balances	138,798,848.	34	157,165,541.				

review, or compilation of its financial statements and selection of an independent accountant?

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

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 Audit

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

732012 11-28-17

X

Form 990 (2017)

X

2c

За

Act and OMB Circular A-133?

SCHEDULE A

.. (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization MINNEAPOLIS JEWISH FEDERATION **Employer identification number**

		MINN	EAPOLIS JE	WISH FEDERAT	ION			4	1-0693866	
Par	ŧΤ	Reason for Public	Charity Status (All organizations must c	omplete th	ıs part) S	ee instructions	•		
The o 1 [2 [3 [4 [rgan	nization is not a private foundation because it is. (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								
5 [An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)								
6 [7 [X	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)								
8 [9 [A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or								
10 [An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)								
11 [12 [An organization organized an organization organized amore publicly supported or lines 12a through 12d that	and operated exclusi and operated exclusi ganizations describe	vely for the benefit of, to	perform to or section	he functio 509(a)(2)	ns of, or to car See section 5	09(a)(3). (•	
a b		Type I. A supporting orgation the supported organization You must of Type II. A supporting org	on(s) the power to recomplete Part IV, Se	gularly appoint or elect a	majority o	of the direc	ctors or trustee	s of the su	upporting	
		control or management o organization(s) You mus			ame perso	ns that co	ntrol or manag	e the supp	ported	
С	<u></u>	Type III functionally inte its supported organization	-					y integrate	ed with,	
d		Type III non-functionally that is not functionally int requirement (see instructional section 1).	egrated The organiz	ation generally must sat	ısfy a dıstr	ibution red	quirement and	•	, .	
е		Check this box if the orga functionally integrated, or	anization received a v	written determination fro	m the IRS	that it is a		I, Type III		
		r the number of supported o	J							
<u>g</u>		ide the following information Name of supported organization	about the supporte (ii) EIN	(iii) Type of organization (described on lines 1 10	(iv) is the orga in your governi	nization listed ng document?	(v) Amount of support (see in:	•	(vi) Amount of other support (see instructions)	
				above (see instructions))	103	140				
Total			l l		1	!]		Į	

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

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

Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received (Do not										
	include any "unusual grants ")	<u>14980461.</u>	23416861.	12623898.	21421022.	23896026.	96338268.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	14980461.	23416861.	12623898.	21421022.	23896026.	96338268.				
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,	Į									
	column (f)						20862939.				
6	Public support. Subtract line 5 from line 4				1		75475329.				
	tion B. Total Support	•		•	1	•	•				
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total				
	Amounts from line 4	14980461.	23416861.		21421022.	23896026.					
8	Gross income from interest.										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	1537588.	1230620.	1246075.	1533068.	1700926.	7248277.				
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on			:							
10	Other income Do not include gain										
	or loss from the sale of capital	,					i				
	assets (Explain in Part VI)	239,473.	111,828.	483.495.	350,787.	421.570.	1607153.				
11	Total support. Add lines 7 through 10						105193698				
	Gross receipts from related activities.	etc. (see instruction	ne)	L	1	12					
	First five years. If the Form 990 is for			d fourth or fifth ta	ax vear as a section						
	organization, check this box and stor	=	, mot, 0000ma, am	a, roaran, or marria	by your do a coolio.	. 66 . (6)(6)					
Sec	tion C. Computation of Publi		centage								
14	Public support percentage for 2017 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	71.75 %				
	Public support percentage from 2016		•	· · · · · · · · · · · · · · · · · · ·		15	69.83 %				
	33 1/3% support test - 2017. If the o			n line 13, and line	14 is 33 1/3% or m	ore, check this bo					
	stop here. The organization qualifies	•		•		.,.	$\triangleright X$				
ь	33 1/3% support test - 2016. If the o		-		line 15 is 33 1/3%	or more, check th					
_	and stop here. The organization qual	•					▶ □				
17a	10% -facts-and-circumstances test	•	•		e 13, 16a or 16b a	and line 14 is 10%	or more				
	and if the organization meets the "fac										
	meets the "facts-and-circumstances"			•	·		N				
h	10% -facts-and-circumstances test	•		,	J	17a and line 15 in	10% or				
J	more, and if the organization meets the	•									
							_				
10	organization meets the "facts-and-circ			•							
<u> 18 </u>	Private foundation. If the organization	n did not check a	uox on line 13, 16	a, 100, 1/a, or 1/b	o, check this box a	ing see instructions					

2017.06000 MINNEAPOLIS JEWISH FEDERA 143619 1

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below*
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes." provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
<u> </u>		
<u> </u>		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
		l i
9a		
9b		
9b		
ļ		
9b		
9b		
9b 9c		

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			21 0023000 Fage 0
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	Nov 20, 1970 (explain in F	Part VI) See instructions.
	other Type III non-functionally integrated supporting organizations must describe the control of	complete Sec	tions A through E	
Sec	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			-
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		· · · · ·
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting orga	anization (see
			5 5	-

Schedule A (Form 990 or 990-EZ) 2017

Par	t V	Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	anizations (continued)	
Secti	on D -	Distributions		•	Current Year
1	Amòu	ints paid to supported organizations to accomplish exer	mpt purposes		
2	Amou	ints paid to perform activity that directly furthers exemp	t purposes of supported		
	organ	izations, in excess of income from activity			
3	Admır	nistrative expenses paid to accomplish exempt purpose	s		
4	Amou	ints paid to acquire exempt-use assets		_	
5	Qualif	ied set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI) See instructions			
7	Total	annual distributions. Add lines 1 through 6		<u> </u>	
8	Distrit	outions to attentive supported organizations to which th	ne organization is responsive	;	
	(provi	de details in Part VI) See instructions			
9	Distrib	outable amount for 2017 from Section C, line 6			
10	Line 8	amount divided by line 9 amount			
			(i)	(ii)	(iii)
Secti	on E -	Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distrib	outable amount for 2017 from Section C, line 6			
		rdistributions, if any, for years prior to 2017 (reason-			
	able c	ause required- explain in Part VI) See instructions			
3	Exces	s distributions carryover, if any, to 2017			
а					
ь	From	2013			
С	From	2014			
d	From	2015			
е	From	2016			
f	Total	of lines 3a through e			
g	Applie	ed to underdistributions of prior years			
h	Applie	ed to 2017 distributable amount			
i	Carry	over from 2012 not applied (see instructions)			
i	Rema	inder Subtract lines 3g, 3h, and 3i from 3f		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
4	Distrib	outions for 2017 from Section D,			
	line 7	\$	1		
а	Applie	ed to underdistributions of prior years			
b	Applie	ed to 2017 distributable amount			
С	Rema	inder Subtract lines 4a and 4b from 4			
5	Rema	ining underdistributions for years prior to 2017, if			
	any S	Subtract lines 3g and 4a from line 2 For result greater			
		ero, explain in Part VI. See instructions			
6	Rema	ining underdistributions for 2017 Subtract lines 3h			
	and 4	b from line 1 For result greater than zero, explain in			
-		/I See instructions			
7	Exces	ss distributions carryover to 2018. Add lines 3j			
	and 4			_	
		down of line 7			
		s from 2013			
		s from 2014			
		s from 2015			
d	Exces	s from 2016		l	1

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: MISCELLANEOUS INCOME FROM VARIOUS SOURCES 239,473. 2013 AMOUNT: \$ 2014 AMOUNT: 111,828. 483,495. 2015 AMOUNT: \$ 350,787. 2016 AMOUNT: \$ 421,570. 2017 AMOUNT: \$

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Shapection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-B.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

 Section 501(c)(4), (5), or (6) organizat 	ions Complete Part III		1_	
Name of organization			Empl	oyer identification number
	OLIS JEWISH FEDE			41-0693866
Part I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures	cal campaign activities	ın Part IV ▶ \$	0
Part I-B Complete if the org	anization is exempt und	er section 501(c)	(3).	•
1 Enter the amount of any excise tax	·		▶\$	0.
2 Enter the amount of any excise tax	, ,			0.
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?		·		Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c)(3).
1 Enter the amount directly expended	by the filing organization for se	ction 527 exempt func	tion activities > \$	
2 Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for se	ection 527	
exempt function activities			▶ \$	
3 Total exempt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL	-1	
line 17b			▶ \$	
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and em	nployer identification number (El	N) of all section 527 pc	olitical organizations to which	the filing organization
made payments For each organization				
contributions received that were pro				e segregated fund or a
political action committee (PAC) If	additional space is needed, prov	vide information in Part	· IV	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's	contributions received and promptly and directly
			funds If none, enter -0-	delivered to a separate
				political organization
				If none, enter -0-
				:
		-		
				l

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

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Schedule C (Form 990 or 990-EZ) 2017	MINNEAPO	DLIS JEW	ISH FED	ERATION	41-0	693866 Page 2
Part II-A Complete if the org section 501(h)).	anization is	exempt ur	nder section	1 501(c)(3) and file		
A Check ► I if the filing organiza	ation belongs to	an affiliated gi	roup (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and shar	re of excess lob	bying expendi	tures)			
B Check 🕨 🔲 if the filing organiza	ition checked b	ox A and "limit	ted control" pro	visions apply		
Limi (The term "expend	its on Lobbying ditures" means				(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public op	oinion (grass ro	ots lobbying)			
b Total lobbying expenditures to influ	uence a legislat	ive body (direc	t lobbying)			
c Total lobbying expenditures (add li	nes 1a and 1b)					
d Other exempt purpose expenditure	es					
e Total exempt purpose expenditure	s (add lines 1c	and 1d)				
f Lobbying nontaxable amount Ente	er the amount fi	rom the followi	ng table in both	columns.	ļ	
If the amount on line 1e, column (a) o	or (b) is: 1	he lobbying n	ontaxable am	ount is:	0.15	72 J.
Not over \$500,000	2	0% of the amo	ount on line 1e		76.	A AUA A A A A A A A A A A A A A A A A A
Over \$500,000 but not over \$1,000	0,000	100,000 plus	15% of the exc	ess over \$500,000	1 1	
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000				23 MARY	事情,你说:	
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
Over \$17,000,000		\$1,000,000			, , , , ,	
g Grassroots nontaxable amount (en		•				
h Subtract line 1g from line 1a If zero						
Subtract line 1f from line 1c If zero					L	_ -
j If there is an amount other than zei		: 1h or line 1i, c	did the organiza	ation file Form 4/20	Г	¬., .
reporting section 4911 tax for this			D			Yes No
(Some organizations th	hat made a sec	ction 501(h) ele	ection do not l	section 501(h) have to complete all d nes 2a through 2f.)	of the five columns be	low.
	Lobbying	Expenditures	During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014		(b) 2015	(c) 2016	(d) 2017	(e) Total
_ 2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount				-		
(150% of line 2d, column (e))						
	<u> </u>					

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990 EZ) 2017 MINNEAPOLIS JEWISH FEDERATION 41-06938 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For ea	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	lobbying activity	Yes	No	Amo	ount	
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
	Volunteers?		Х			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X			
	Media advertisements?		X			
	Mailings to members, legislators, or the public?		X			
	Publications, or published or broadcast statements?		Х			
	Grants to other organizations for lobbying purposes?		Х		-	
	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х			
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
	Other activities?	X		90	0,228.	
	Total Add lines 1c through 1i				,228.	
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х			
	f "Yes," enter the amount of any tax incurred under section 4912					
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), or sec	tion		
				Yes	No	
1 '	Nere substantially all (90% or more) dues received nondeductible by members?		1			
	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 campaign activity expenditures from the	e prior vear	1			
	III-B Complete if the organization is exempt under section 501(c)(4), section			tion		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OR	(b) Part	III-A, line	e 3, is	
	answered "Yes."					
1 1	Dues, assessments and similar amounts from members		1			
2 3	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal				
	expenses for which the section 527(f) tax was paid).					
a (Current year		2a			
ь (Carryover from last year		2b			
c ⁻	Fotal		2c			
3 /	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 1	f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p					
	expenditure next year?		4			
5	axable amount of lobbying and political expenditures (see instructions)		5	_		
Part	IV Supplemental Information					
ınstruc	e the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group tions), and Part II-B, line 1 Also, complete this part for any additional information II-B, LINE 1, LOBBYING ACTIVITIES:	list), Part II-	A, lines 1 ai	nd 2 (see		
	FEDERATION PAID \$90,228 TO THE JEWISH COMMUNITY RE	יד אחדר זי	ופ פסניי	NCIL		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THITTOL	12 COO	.4CTL		
FOR	A GOVERNMENT RELATIONS POSITION FOR LOBBYING ON BE	HALF C	F THE			
ENT	RE TWIN CITIES JEWISH COMMUNITY.					

SCHEDULE D

· •(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

Name of the organization

Employer identification number

ıDα	MINNEAPOLIS JEWISH rt: Organizations Maintaining Donor Advised		r Accounts - Canalata (Aba
<u>P</u> a	· · · · · · · · · · · · · · · · · · ·		Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
	Total aumber at and of year	258	701
1	Total number at end of year	7,396,040.	5,111,684.
2	Aggregate value of contributions to (during year)	5,478,710.	5,931,469.
3	Aggregate value of grants from (during year)	47,760,522.	81,595,569.
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w		X Yes No
_	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose co	X Yes No
ıPa:	impermissible private benefit? ↑ The Conservation Easements. Complete if the org	paration answered "Ves" on Form 900. Pa	
			ut iv, mie /
1	Purpose(s) of conservation easements held by the organization		really important land area
	Preservation of land for public use (e.g., recreation or ec		ically important land area
	Protection of natural habitat	Preservation of a certifi	ed historic structure
_	Preservation of open space	and a construction and the form of	a consequence accoment on the last
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the form of	Held at the End of the Tax Year
_	day of the tax year Total number of conservation easements		2a
a			2b
b	Total acreage restricted by conservation easements Number of conservation easements on a certified historic stru	atura includad in (a)	2c
C		• •	
d	listed in the National Register	ter 7723700, and not on a historic structure	2d
3	Number of conservation easements modified, transferred, rele	acad astinguished or terminated by the a	
3	year	ased, extinguished, or terminated by the o	iganization during the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	·	
•	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		 ··
•		and and a second	,
7	Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and enforcing conservation	n easements during the year
•	> \$		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)	(4)(B)(i)
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	e organization's accounting for
	conservation easements		
Pa	TELLIS Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue stateme	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	bition, education, or research in furtheranc	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	es these items	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement ai	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of public	c 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		► \$ ► \$
2	if the organization received or held works of art, historical trea	sures, or other similar assets for financial g	
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2017

			OLIS JEWISH			Ciil-		93866	Pag	<u>e 2</u>
to liceck all that apply) a	. Pa									
a Public achibotion d Loan or exchange programs b Scholarly research c Preservation for future generations e Cherry Cherr	3	Using the organization's acquisition, accession	on, and other records	, check any of the f	following that are a	significant	use of its c	ollection ite	ems	
b Scholarly research e		(check all that apply)								
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 1b Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 1c Is designed an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 1c Inding balance 1c Beginning balance 2d Additions during the year 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Yes No 2 If Yes, explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Yes No 2 If Yes, explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Yes No 3 If Yes, explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII 2 Provide a degration or provided in the organization has been provided on Part XIII 3 Degration of year balance 4 Contributions 4 Addition during the year (a) Prior years back (in the organization of the organization has been provided on Provided on Provided Organization (a) Provided Organization (b) Provided Organization (b) Provided Organization (b) Provided Organization (c) Provided Organization (а	Public exhibition	d	Loan or exc	hange programs					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Provide a mamount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 11 Tall is the organization and agent in Part XIII and complete the following table Complete the part of the part XIII Provided the part XIII Provided Amount Tall Ta	þ	Scholarly research	е	Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to traise funds rather than to be maintained as part of the organization collection? PartitV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 Is it the organization an agent, flustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is it the organization and the arrangement in Part XIII and complete the following table Part XIII	С									
to be sold to raise funds rather than to be maintained as part of the organization's collection? Part	4						ose in Part	XIII		
Eacrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X In 1	5					ar assets	_	_	_	
reported an amount on Form 990, Part X, line 21 1a is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? X Yes No b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part Y										No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? If Yes, "explain the arrangement in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has a solid provided on Part XIII in Part XIII Check here if the explanation has a solid provided by the part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIII Check here if the explanation has been provided on Part XIII in Part XIIII Check here if the explanation has a solid part XIII in Part XIII Check here i	Rai			te if the organizatio	n answered "Yes" o	n Form 99	0, Part IV, I	line 9, or		
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Oistinbutions during the year e Oistinbutions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes		· · · · · · · · · · · · · · · · · · ·		any for contributions	or other accets no	tuncluded				—
b If "Yes," explan the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability Endowment Funds	та	<u>-</u>	an or other intermedia	ary for contributions	s or other assets no	i included	_	7 vos	X I	Ala.
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 8 Distributions during the year f Ending balance 9 Distributions during the year g		·	and complete the fell	owing table				7 162	الثثا	10
C Beginning balance 1c 1d	b	in res, explain the arrangement in Part Allin	and complete the low	ownig table			T	Amount		—
d Additions during the year	_	Beginning balance				10	†	7 (IIIOGIIL		_
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? X Yes No b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII		-								_
1										_
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	_						†			_
Fact Section Part XIII Check here if the explanation has been provided on Part XIII Teach Teach Teach Teach		•	orm 990. Part X. line 2	21, for escrow or cu	istodial account liab		X	Yes		— No
Rart V		•				-				
1a Beginning of year balance b Contributions 7,049, 161, 225, 300, 797. c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ 0 % 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 (ii) related organizations (iii) related organizations (iii) related not an endowned uses of the organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds 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 1a Land b Buildings c Leasehold improvements 4 Caupment 5 (172, 266, 49,771, 122,495, 6 (172,495, 6 (172,2495, 6 (172,2495, 6 (172,2495, 6 (172,2497, 7 (172,266, 6 (172,171,112,112,171,112,171,113,133, 6 (172,171,112,113,133, 6 (173,184,184) 6 (175,184,184) 6	Pai	t.V Endowment Funds. Complete i	f the organization ans	wered "Yes" on Fo	rm 990, Part IV, line	10				
b Contributions c Net investment earnings, gams, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment b = 0.00			(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four ye	ars ba	ck
C Net investment earnings, gains, and losses d Grants or scholarships	1a	Beginning of year balance	6,084,375.	5,656,163.	5,471,914	. 5,	971,012.	5,6	22,08	37.
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Board designated or quasi-endowment ► 6,222,539, 6,084,375, 5,656,163, 5,471,914, 5,971,012. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ► 00 % b Permanent endowment ► 69.94 % c Temporarily restricted endowment ► 30.06 % 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 (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4. Describe in Part XIII the intended uses of the organization's endowment funds Rart_ V Land, Buildings, and Equipment.	b	Contributions	7,049.	161.	225		300.		79	7.
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 6,222,539, 6,084,375, 5,656,163, 5,471,914, 5,971,012. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment 69.94 % C Temporarily restricted endowment 30.06 % 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 bi if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI	С	Net investment earnings, gains, and losses	430,264.	645,961.	242,312		182,103.	8-	41,84	19.
and programs f. Administrative expenses	d	Grants or scholarships	236,811.	160,475.	3,954		257,775.	4:	93,72	21.
f Administrative expenses 62,338. 57,435. 54,334. 59,520. 0. g End of year balance 6,222,539. 6,084,375. 5,656,163. 5,471,914. 5,971,012. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment	е	Other expenditures for facilities								
g End of year balance 6,222,539. 6,084,375. 5,656,163. 5,471,914. 5,971,012. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ .00 % Permanent endowment ▶ 69.94 % C Temporarily restricted endowment ▶ .30.06 % 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 (ii) related organizations b if "Yes" on line 3a(ii), are the related organization's listed as required on Schedule R? 4. Describe in Part XIII the intended uses of the organization's endowment funds Part XIII 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 1a Land b Buildings c Leasehold improvements 4 Equipment 5 115, 257, 45, 257, 70,000. 6 Equipment 7 106, 383, 106, 383.		and programs								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶	f	Administrative expenses	62,338.	57,435.	54,334	+				
a Board designated or quasi-endowment ▶	g	End of year balance	6,222,539.	6,084,375.	5,656,163	. 5,	<u>471,914.</u>	5,9	71,01	<u>.2.</u>
b Permanent endowment ▶ 69.94	2	Provide the estimated percentage of the curr		(line 1g, column (a)) held as					
c Temporarily restricted endowment ▶ 30.06 % 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 (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VIII Land, Buildings, and Equipment.	а		.00	_%						
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 (ii) related organizations (ii) related organizations (iii) x (iii)	_									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VII Land, Buildings, and Equipment.	С	· · ·								
Yes No		,	•							
(i) unrelated organizations (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VIII Land, Buildings, and Equipment.	3a		ssion of the organizat	tion that are held ar	id administered for	the organia	zation	<u></u>	Τ.	
(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part III 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 (other) (c) Accumulated depreciation 1a Land b Buildings		· ·								
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment.		.,								
4 Describe in Part XIII the intended uses of the organization's endowment funds [Part VII 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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements 115,257. 45,257. 70,000. d Equipment e Other 106,383. 106,383. 0.		•								<u>~</u>
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 (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other Omplete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10 (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements 115,257. 45,257. 70,000. 172,266. 49,771. 122,495. e Other			•					30		—
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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation				<u>ment tunas</u>						—
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	[IAGI			Part IV line 11a S	on Form 990 Part \	(line 10				
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other basis (investment) basis (other) depreciation 115,257. 45,257. 70,000. 172,266. 49,771. 122,495. 106,383. 106,383. 0.							tod	(d) Book v	- Iuo	—
1a Land b Buildings c Leasehold improvements 115,257. 45,257. 70,000. d Equipment 172,266. 49,771. 122,495. e Other 106,383. 106,383. 0.		Description of property	1 ' '		', '			(u) BOOK V	aiue	
b Buildings c Leasehold improvements 115,257. 45,257. 70,000. d Equipment 172,266. 49,771. 122,495. e Other 106,383. 106,383. 0.		Lond	5433 (111753411	544,	(ourion)					—
c Leasehold improvements 115,257. 45,257. 70,000. d Equipment 172,266. 49,771. 122,495. e Other 106,383. 106,383. 0.										—
d Equipment 172,266. 49,771. 122,495. e Other 106,383. 106,383. 0.		_		11	5.257.	45.2	57.	70	000	- c
e Other 106,383. 106,383. 0.		•								
		• •								
The state of the s			gual Form 990 Part X				•	192		<u> </u>

Schedule D (Form 990) 2017

Part VII	Investments - Other Securities.	

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) PRIVATE EQUITY AND HEDGE		
(B) FUNDS	23,789,370.	END-OF-YEAR MARKET VALUE
(C) REAL ESTATE	1,383,917.	END-OF-YEAR MARKET VALUE
(D) INTEREST IN CHARITABLE		
(E) TRUSTS HELD BY OTHERS	4,587.	END-OF-YEAR MARKET VALUE
_ (F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	25,177,874.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		

Complete if the organization answered Tes	on Form 990, Part IV, line	TIC See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col. (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUST	9,375,000.
(2) INVESTMENTS HELD IN CHARITABLE TRUSTS	3,104,966.
(3) POOLED INCOME FUNDS	77,866.
(4) RECEIVABLE FROM TERMED CHARITABLE TRUST	316,341.
(5) OTHER ASSETS	696,854.
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	13,571,027.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OBLIGATIONS UNDER SPLIT-INTEREST	
(3) AGREEMENTS	2,095,184.
(4) DUE TO JEWISH COMMUNITY BUILDING	
(5) CORPORATION	3,298,992.
(6) OTHER LIABILITIES	618,113.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25,)	6,012,289.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 MINNEAPOLIS JEWISH FEDE		41-069386	<u> 6 Page 4</u>
Part XI Reconciliation of Revenue per Audited Financial Sta		e per Return.	-
Complete if the organization answered "Yes" on Form 990, Part IV, I	ne 12a		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	ا م ا		
 a Net unrealized gains (losses) on investments b Donated services and use of facilities 	2a		
c Recoveries of prior year grants	2b 2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	·)	5	
Part XII Reconciliation of Expenses per Audited Financial St	atements With Expens	es per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, II	ne 12a		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	_2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)			
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 Part XIII Supplemental Information.	8.)	5	
	4. Don't IV. brand the resid Obs. De-		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide a		rt v, line 4, Part X, line 2, Par	t XI,
and 20 and 40, and 7 art XII, lines 20 and 40 Also complete this part to provide a	ny additional information		
PART IV, LINE 2B:			
THE FEDERATION HOLDS FUNDS FOR WHICH DONO	RS HAVE SPECIFI	ED THE ULTIMAT	€
BENEFICIARY, BUT FOR WHICH DISTRIBUTIONS	HAVE NOT YET BE	EN MADE.	
		······································	
PART V, LINE 4:			
IMI V, DIND 4.	·		
ENDOWMENT FUNDS ARE USED TO SUPPORT JEWIS	H LIFE IN THE G	REATER MINNEADO	NI.TG
THE TOTAL TOTAL COLOR TO DOLLOW COMMENT	. BII III III G	MINION MINIONI	7010
AREA AND OVERSEAS.			
			
PART X, LINE 2:			
			
THE ORGANIZATION HAS ADOPTED A POLICY THAT	r CLARIFIES THE	ACCOUNTING FOR	<u> </u>
UNCERTAINTY IN INCOME TAXES RECOGNIZED IN	AN ORGANIZATIO	N'S FINANCIAL	
CMAMBMENTO MUD DOLLOW DROSS			
STATEMENTS. THE POLICY DESCRIBES A RECOGN	TTION THRESHOLD	· · · · · · · · · · · · · · · · · · ·	
732054 10-09-17		Schedule D (Form	1 990) 2017

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

2017
Open to Public Inspection

Name of the organization

Employer identification number

MINNEAPOLIS JEW	ISH FEDER	RATION		41-069386	
Part General Info	rmation on A	ctivities Out	side the United States. Comple	ete if the organization answered "	Yes" on
Form 990, Part IV	/, line 14b				
1 For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its gra	ints and other assistance,	
the grantees' eligibility fo	or the grants or a	issistance, and t	he selection criteria used to award the	grants or assistance?	Yes X No
2 For grantmakers. Desc	ribe in Part V the	organization's p	procedures for monitoring the use of its	grants and other assistance outs	ide the
United States					
3 Activities per Region (TI	ne following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded)	
(a) Region	(b) Number of		(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to	, ,,	investments
		in the region	recipients located in the region)	of service(s) in the region	in the region
					1
					j
MIDDLE EAST AND					
NORTH AFRICA	0	0	GRANTS (DIRECT)	N/A	20,000.
SEE PART V FOR	l				
EXPLANATION ON					
PASSTHROUGH GRANTS					1
OUTSIDE THE US	0	0	GRANTS (INDIRECT)	N/A	2,884,599.
CENTRAL AMERICA AND					
THE CARIBBEAN -					
ANTIGUA & BARBUDA,		_	_		
ARUBA, BAHAMAS,	0	0	INVESTMENTS	N/A	10,640,000.
	İ				
					}
MIDDLE EAST AND				L.,	700 000
NORTH AFRICA	0	0	INVESTMENTS	N/A	708,226.
					
,					
	1				
	<u> </u>	-			
		'			
3 a Sub-total	0	0			14,252,825.
b Total from continuation					1
sheets to Part I	o	0			0.
c Totals (add lines 3a					
and 3b)	o	0			14,252,825.

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

Schedule F (Form 990) 2017

MINNEAPOLIS JEWISH FEDERATION Schedule F (Form 990) 2017 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed Part II

(i) Method of valuation (book, FMV, appraisal, other)						2	0
(h) Description of noncash assistance	0. N/A	0. N/A					
(g) Amount of noncash assistance	0.	• 0				empt	
(f) Manner of cash disbursement	2884599, WIRE/CHECK	20,000.WIRE/CHECK				ecognized as tax-ex	
(e) Amount of cash grant	2884599.	20,000.				oreign country, r	
(d) Purpose of grant	SEE PART V FOR MORE INFORMATION ON PASSTHROUGH GRANTS OUTSIDE THE US	GENERAL SUPPORT				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	
(c) Region	SEB PART V	MIDDLE EAST AND NORTH AFRICA				ns listed above that are r nsel has provided a sect	r entities
(b) IRS code section and EIN (if applicable)						recipient organization the grantee or coult	other organizations o
1 (a) Name of organization						2 Enter total number of roby by the IRS, or for which	3 Enter total number of other organizations or entities

Schedule F (Form 990) 2017

Page 3

41-0693866

MINNEAPOLIS JEWISH FEDERATION

Schedule F (Form 990) 2017

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

Part III can be duplicated if additional space is needed

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2017
(g) Description of noncash assistance					Schedu
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2017

Yes X No

Instructions for Form 5713; don't file with Form 990)

Page 5

Supplemental Information

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

PART I, LINE 2:

THE FEDERATION PRIMARILY USES JEWISH FEDERATIONS OF NORTH AMERICA (JFNA)

TO PERFORM GRANT MAKING TO ORGANIZATIONS OUTSIDE THE UNITED STATES. JFNA

IS THE OVERSEAS GRANT MAKING ORGANIZATION FOR 155 JEWISH FEDERATIONS IN

THE UNITED STATES. JFNA PERFORMS ALL DUE DILIGENCE WITH RESPECT TO

EVALUATING THE RECIPIENT ORGANIZATIONS TO ENSURE THEY MEET THE

ELIGIBILITY CRITERIA REQUIRED TO MEET THE EQUIVALENCY OF 501(C)(3) STATUS

IN THE UNITED STATES. THE FEDERATION SPECIFIES CERTAIN PORTIONS FOR

RECIPIENT ORGANIZATIONS IN ISRAEL AND THE FORMER SOVIET UNION; ALTHOUGH

SPECIFIC DOLLAR AMOUNTS PER REGION CANNOT BE DETERMINED. THE GRANT

AMOUNTS REPORTED IN THE FEDERATION'S FORM 990 WILL ALSO BE REPORTED ON

JFNA'S FORM 990 SCHEDULE F.

PART I, LINE 3:

ACCRUAL METHOD IS USED TO ACCOUNT FOR EXPENDITURES.

SCHEDULE F, PART IV, LINE 3:

THE ORGANIZATION HAS INVESTED IN FOREIGN CORPORATIONS AND MUTUAL FUNDS.

HOWEVER, THE FILING REQUIREMENTS OF FORM 5471 HAVE NOT BEEN MET.

SCHEDULE F, PART IV, LINE 4:

THE ORGANIZATION HAS INVESTED IN PARTNERSHIPS THAT HOLD DIRECT OR

INDIRECT INTERESTS IN PASSIVE FOREIGN INVESTMENT COMPANIES. THE

INVESTMENT PARTNERSHIPS HAVE PROPERLY FILED FORM 8621, OR THE

UNDERLYING INVESTMENTS DID NOT GENERATE ANY UNRELATED BUSINESS INCOME.

UNDER THESE FACTS, IT IS NOT NECESSARY FOR THE ORGANIZATION TO FILE AN

ADDITIONAL 8621.

Schedule F (Form 990) 2017

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

Open to Public

Inspection

OMB No 1545-0047

Name of the organization MINNEAPOLIS JEWISH	IS JEWISH	FEDERATION					Employer identification number 41-0693866
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the g	o substantiate the	amount of the grants	or assistance, the g	rantees' eligibility	for the grants or assis	rants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's propedures for monitoring the use of	stance? cedures for monitor		grant funds in the United States	States			X Yes No
ᆵ	Domestic Organiz	ations and Domestic	Governments. Co	omplete if the orga	Inization answered "Y	'es" on Form 990, Part	IV, line 21, for any
n	\$5,000 Part II can	be duplicated if additic	nal space is neede	þ			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ABBOTT NORTHWESTERN HOSPITAL FOUNDATION - P.O. BOX 43 OFFICE OF							
PHILANTHROPY - MINNEAPOLIS, MN	(5)(3)(0)	501(0)(3)	16 000	c	4	4/N	VIRGINIA PIPER CANCER
				• •			
ACLU OF MN FOUNDATION							
	1						
MINNEAPOLIS, MN 55414	41-6050012 501(C)(3)	501(C)(3)	10,500.	0	N/A	N/A	GENERAL OPERATING SUPPORT
ADATH JESHIJRIN CONGREGATION							
10500 HILLSIDE LANE WEST							
MINNETONKA, MN 55305	41-0693940 501(C)(3)	501(C)(3)	104,550.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN FRIENDS OF AISH HATORAH							
WESTERN REGION, 1417 S DOHENY DRIVE							
LOS ANGELES, CA 90035	95-3867719 501(C)(3)	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN FRIENDS OF MIGDAL TORAH.							
INC - 1191 EAST 18TH STREET -							
BROOKLYN, NY 11230	11-3036558	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN FRIENDS OF THE JERUSALEM							
KOLLEL - 190 GLEN AVENUE S -							
LAKEWOOD, NJ 08701	20-1320557 501(C)(3)	501(C)(3)	8,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
ļ	nd government orc	anizations listed in the	line 1 table				114.
-1	s listed in the line	table					•
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2017)

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	IS JEWISH	FEDERATION					41-0693866 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	Assistance to Gov	rernments and Organ	Organizations in the United States	- 1	(Schedule I (Form 990), Part II)	t II)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HEBREW ACADEMY, INC 4334 HOBBS ROAD GREENSBORO, NC 27410	9/65861-95	501(C)(3)	10,000.	4.0	W/A	N/A	SCHOLARSHIPS
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE, INC P.O. BOX 4124 - NEW YORK, NY 10163	13-1656634	501(C)(3)	244,850.	0	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET, 11TH PLOOR NEW YORK, NY 10018	22-2584370 501(C)(3)	501(C)(3)	25,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN RED CROSS P.O. BOX 37839 BOONE, IA 50037	53-0196605	501(C)(3)	25,250.	0	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN REFUGEB COMMITTEE WORLD HEADQUARTERS - 615 1ST AVENUE NE, SUITE 500 - MINNEAPOLIS, MN 55413	36-3241033	501(C)(3)	15,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
AMERICAN SUPPORT FOR ISRAEL, INC. P.O. BOX 3263 WASHINGTON, DC 20010	26-3383926	501(C)(3)	7,500.	0	N/A	N/A	TAG MEIR 580463933
AMOS AND CELIA HEILICHER MINNEAPOLIS JEWISH DAY SCHOOL - 4330 SOUTH CEDAR LAKE ROAD - ST LOUIS PARK, MN 55416	41-1522634	501(C)(3)	235,071.	0	N/A	N/A	GENERAL OPERATING SUPPORT
BABY'S SPACE: A PLACE TO GROW 2438 18TH AVENUE SOUTH MINNEAPOLIS, MN 55404	20-4502788	501(C)(3)	.000,05	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
BAIS YAAKOV HIGH SCHOOL 4221 SUNSET BLVD MINNEAPOLIS, MN 55416	41-1797413 501(C)(3)	501(C)(3)	30,956.	0	N/A	N/A	GENERAL OPERATING SUPPORT
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Schedule I (Form 990) MINNEAPOLIS	IS JEWISH	JEWISH FEDERATION					41-0693866 Page 1
(a) Name and address of (b) EIN (c) IRC sect organization or government if applicab	Assistance to Go	(c) IRC section if applicable	Interpretations in the United States (d) Amount of (e) Amourt of cash grant assistan	1 7 % 0	(Schedule I (Form 990), Part II) t of (f) Method of (a) valuation no e (book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAIS YISROEL CONGREGATION 4221 SUNSET BLVD MINNEAPOLIS MN 55416	41-1664904	501(C)(3)	08.99	c	appraisal, other)	4 / N	GEMILUS CHESED ZICHRON
	41-1409208	501(C)(3)	1		N/A	N/A	GENERAL OPERATING SUPPORT
BETH EL FOUNDATION OF MINNESOTA, INC 5225 BARRY STREET WEST - ST LOUIS PARK, MN 55416	46-4866772	501(C)(3)	15,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
BETH EL SYNAGOGUE 5225 BARRY STREET WEST ST LOUIS PARK, MN 55416	41-0711587	501(C)(3)	409,180.	0	N/A	N/A	GENERAL OPERATING SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION 33 EAST 33RD STREET, 7TH FLOOR NEW YORK, NY 10016	13-4092050	501(C)(3)	6,100.	0	N/A	N/A	GENERAL OPERATING SUPPORT
BLAKE SCHOOL, INSTITUTIONAL ADVANCEMENT DEPT - 110 BLAKE ROAD SOUTH - HOPKINS, MN 55343	23-7243247	501(C)(3)	51,100.	0	N/A	N/A	ANNUAL FUND
BRIDGES FOR PEACE, INC. 5995 N. WICKHAM ROAD MELBOURNE, FL 32940	41-1334042	501(C)(3)	5,000.	0	N/A	N/A	FEED MY SHEEP PROGRAM
BROTHER'S BROTHER FOUNDATION 1200 GALVESTON AVENUE PITTSBURGH, PA 15233	34-6562544	501(C)(3)	15,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
CAMP RAMAH IN WI 65 E. WACKER PLACE, SUITE 1200 CHICAGO, IL 60601	36-6009250	501(C)(3)	7,250.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
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Schedule I (Form 990) MINNEAPOLIS		JEWISH FEDERATION				4	41-0693866 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	Assistance to Go	vernments and Organ	Organizations in the United States		(Schedule I (Form 990), Par	Part II)	•
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR ISRAEL EDUCATION, INC. P.O. BOX 15129 ATLANTA, GA 30333	26-0220636	501(C)(3)	10,000.	• 0	N/A	N/A	GENERAL OPERATING SUPPORT
COMMONBOND COMMUNITIES 1080 MONTREAL AVENUE ST PAUL, MN 55116	41-1260469	501(C)(3)	5,000.	.0	N/A	N/A	GENERAL OPERATING SUPPORT
DARCHEI NOAM CONGREGATION MN 2950 JOPPA AVE S ST LOUIS PARK, MN 55416		501(C)(3)	5,610.	0	N/A	N/A	GENERAL OPERATING SUPPORT
EDINA GIVE AND GO 5701 NORMANDALE ROAD, ROOM 336 EDINA, MN 55424	47-5031672	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
ENVIRONMENTAL DEFENSE FUND INC, 257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501(C)(3)	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
FISHER HOUSE FOUNDATION, INC. 111 ROCKVILLE PIKE, SUITE 600 ROCKVILLE, MD 20852	11-3158401	501(C)(3)	5,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
FOOD GROUP 8501 54TH AVENUE NORTH NEW HOPE, MN 55428	41-1246504 501(C)(3)	501(C)(3)	10,000.	.0	N/A	N/A	GENERAL OPERATING SUPPORT
FOUNDATION FOR EXHIBITION OF PHOTOGRAPHY - 633 UNIVERSITY AVENUE - ST PAUL, MN 55104	68-0544634	501(C)(3)	10,000.	. o	N/A	N/ A	GENERAL OPERATING SUPPORT
FRIENDS OF ARAVA INSTITUTE, LTD 896 BEACON STREET BOSTON, MA 02215	11-3485736 501(C)(3)	501(C)(3)	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
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Form 990) MINNEAPOLIS JEWISH FEDERATION	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)
Sched	Part II

(a) Name and address of (b) EIN (c) IRC sect organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	ion (d) Amount of (e) Amount of cash grant assistance (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF THE EARTH 1101 15TH STREET NW, SUITE 1100 WASHINGTON, DC 20005	23-7420660	501(C)(3)	17,500.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
FRIENDS OF THE ISRAEL DEFENSE FORCES - 60 EAST 42ND STREET - NEW YORK, NY 10165	13-3156445	501(C)(3)	10,750.	0	N/A	N/A	GENERAL OPERATING SUPPORT
FSISI/DISSENT 120 WALL STREET, 31ST FLOOR NEW YORK, NY 10005	13-2993308	501(C)(3)	10,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
GREATER MINNEAPOLIS CRISIS NURSERY 4544 4TH AVENUE S MINNEAPOLIS, MN 55419	41-1379021	501(C)(3)	6,250.	0.	N/A	N/A	PANM PEDIATRIC ASSESSMENT & MEDICAL MGT PROGRAM
GREATER TWIN CITIES UNITED WAY, FINANCE DEPARTMENT - P.O. BOX 2949 - MINNEAPOLIS, MN 55402	41-1973442	501(C)(3)	237,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
HAROLD GRINSPOON FOUNDATION 67 HUNT STREET, SUITE 100 AGAWAM, MA 01001	04-6685725	501(C)(3)	40,522.	0	N/A	N/A	GENERAL OPERATING SUPPORT
HEILICHER MINNEAPOLIS JEWISH DAY SCHOOL - 4330 SOUTH CEDAR LAKE ROAD - ST LOUIS PARK, MN 55416	41-1522634 S01(C)(3)	501(C)(3)	109,891.	0	N/A	N/A	GENERAL OPERATING SUPPORT
HERZL CAMP FOUNDATION, SABES JCC 4330 S. CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	83-0506393	501(C)(3)	6,050.	0	N/A	N/A	GENERAL OPERATING SUPPORT
HERZL CAMP, SABES JCC 4330 S. CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	41-6009136 501(C)(3)	501(C)(3)	19,200.	0	N/A	N/A	GENERAL OPERATING SUPPORT
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Schedule I (Form 990) MINNEAPOLIS	IS JEWISH	FEDERATION				4	41-0693866 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	Assistance to Go		Organizations in the United States		(Schedule I (Form 990), Part II	١॥)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUNGER SOLUTIONS MINNESOTA 555 PARK STREET, SUITE 420 ST PAUL, MN 55103	36-3567366	501(C)(3)	5,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
ILLUSION THEATER AND SCHOOL, INC. 528 HENNEPIN AVENUE, SUITE 704 MINNEAPOLIS, MN 55403	23-7392140	501(C)(3)	7,000.	.0	N/A	N/A	GENERAL OPERATING SUPPORT
INTERNATIONAL MEDICAL CORPS 12400 WILSHIRE BLVD, SUITE 1500 LOS ANGELES, CA 90025	95-3949646	501(C)(3)	25,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
ISRAEL PROJECT, INC (TIP) P.O. BOX 27999 WASHINGTON, DC 20038	37-1472882	501(C)(3)	12,250.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH AGENCY FOR ISRAEL NORTH AMERICA - 633 THIRD AVENUE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483	501(C)(3)	25,000.	0.	N/A	N/A	ALIYA TO ISRAEL FOR MEDICAL RELICENSING PROGRAM
JEWISH AGENCY FOR ISRAEL NORTH AMERICA - 633 THIRD AVENUE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483	501(C)(3)	3,250.	0	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH AGENCY FOR ISRAEL NORTH AMERICA - 633 THIRD AVENUE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483	501(C)(3)	20,225.	0	N/A	N/A	ISRAEL LONE SOLDIER WINGS PROGRAM
JEWISH AGENCY FOR ISRAEL NORTH AMERICA - 633 THIRD AVENUE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483	501(C)(3)	43,633.	.0	N/A	N/A	SUMMER CAMPS IN BAKU
JEWISH AGENCY FOR ISRAEL NORTH AMERICA - 633 THIRD AVENUE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483 501(C)(3)	501(C)(3)	10,000.	0.	N/A	N/A	AMIGOUR FOR NEW CONSTRUCTION - REHOVOT USHIOT ELDERLY HOME
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Schedule I (Form 990) MINNEAPOLIS JEWISH FEDERAT Part II Continuation of Grants and Other Assistance to Governments and	S JEWISH		ION Organizations in the United States		(Schedule I (Form 990), Part II		41-0693866 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY ACTION 2375 UNIVERSITY AVENUE W, SUITE 150	41-1830619	501/07/37		c	« / w	¥/x	HEADERS ON THE SERVICE
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MINNEAPOLIS, MN 55403	41-0826434	501(C)(3)	285,667.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH COMMUNITY RELATIONS COUNCIL OF MINNESOTA & DAKOTAS - 12 NORTH 12TH STREET, SUITE 480 - MINNEAPOLIS, MN 55403	41-0826434	501(C)(3)	64,000.	0.	N/A	N/A	COMMUNITY SECURITY
15 .	***************************************						WITNESS TO THE HOLOCAUST
MINNEAPOLIS, MN 55403	4T-0826434	501(C)(3)	16,500.	0.	N/A	N/A	BOOK PROJECT
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD MINNETONKA, MN 55422	41-0693860	501(C)(3)	750,122.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860 501(C)(3)	501(C)(3)	40,000.	•0	N/A	N/A	CAPITAL CAMPAIGN
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860	501(C)(3)	30,000.	• 0	N/A	N/A	EMERGENCY PINANCIAL ASSISTANCE
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860	501(C)(3)	35,340.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860 501(C)(3)	501(C)(3)	11,860.	.0	N/A	N/A	HAG SAMEACH PROGRAM
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	Assistance to Go	vernments and Organ	Izations in the Un		(Schedule I (Form 990), Part II)	111)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH PAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860	501(C)(3)	.000,2	0.	N/A	N/A	HOLOCAUST SURVIVOR SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860 501(C)(3)	501(C)(3)	107,336.	0,	N/A	N/A	JACOB GARBER TRANSPORTATION SERVICE
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860	501(C)(3)	45,000.	0.	N/A	N/A	SCHOLARSHIPS
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860	501(C)(3)	43,027.	0.	N/A	N/A	PJ LIBRARY PROGRAM
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860 501(C)(3)	501(C)(3)	27,500.	0.	N/A	N/A	INCLUSION PROGRAM
JEWISH FAMILY & CHILDREN'S SERVICE 5905 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	41-0693860	501(C)(3)	25,000.	0.	N/A	N/A	PARENT CHILD HOME PROGRAM
JEWISH FEDERATION OF COLLIER COUNTY - 2500 VANDERBILT BEACH ROAD, SUITE 2201 - NAPLES, FL 34109	59-2151725	501(C)(3)	40,750.	0	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH FEDERATION OF COLLIER COUNTY - 2500 VANDERBILT BEACH ROAD, SUITE 2201 - NAPLES, FL 34109	59-2151725	501(C)(3)	5,000.	0	N/A	N/A	HURRICANE IRMA RELIBF FUND
JEWISH FEDERATION OF GREATER PORTLAND - 6680 SW CAPITOL HIGHWAY - PORTLAND, OR 97219	93-0386825	501(C)(3)	12,000.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
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Schedule I (Form 990) MINNEAPOLIS	IS JEWISH FEDERA	FEDERATION				4	41-0693866 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	Assistance to Gov	vernments and Organ	izations in the Uni		(Schedule I (Form 990), Part II)	۲॥)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATIONS OF NORTH AMERICA - P.O. BOX 157 - NEW YORK, NY 10268	13-1624240	501(C)(3)	5,923.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH FEDERATIONS OF NORTH AMERICA - P.O. BOX 157 - NEW YORK, NY 10268	13-1624240	501(C)(3)	. 57,500.	.0	N/A	N/A	TAGLIT-BIRTHRIGHT ISRAEL
JEWISH HISTORICAL SOCIETY OF THE UPPER MIDWEST - 4330 SOUTH CEDAR LAKE ROAD - ST LOUIS PARK, MN 55416	36-3337514 501(C)(3)	501(C)(3)	4,288.	0,	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH HOUSING AND PROGRAMMING 9280 GOLDEN VALLEY RD, STE 140 GOLDEN VALLEY, MN 55427	27-2033464	501(C)(3)	41,000.	0	N/A	N/A	CAPITAL CAMPAIGN
JEWISH HOUSING AND PROGRAMMING 9280 GOLDEN VALLEY RD, STE 140 GOLDEN VALLEY, MN 55427	27-2033464 501(C)(3)	501(C)(3)	3,600.	•0	N/A	N/A	GENERAL OPERATING SUPPORT
JEWISH HOUSING AND PROGRAMMING 9280 GOLDEN VALLEY RD, STE 140 GOLDEN VALLEY, MN 55427	27-2033464	501(C)(3)	102,000.	0.	N/A	N/A	TENANT COMMUNITY ENGAGEMENT
KENESSETH ISRAEL SYNAGOGUE 4330 W 28TH STREET ST LOUIS PARK, MN 55416	41-0780896	501(C)(3)	32,310.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
KENESSETH ISRAEL SYNAGOGUE 4330 W 28TH STREET ST LOUIS PARK, MN 55416	41-0780896	501(C)(3)	35,004.	• 0	N/A	N/A	RABBI PARSONAGE
MASORTI FOUNDATION FOR CONSERVATIVE JUDAISM IN ISRAEL - 475 RIVERSIDE DRIVE, SUITE 832 - NEW YORK, NY 10115	13-3137586 501(C)(3)	501(C)(3)	8 750	.0	N/A	N/ A	GENERAL OPERATING SUPPORT
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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASORTI FOUNDATION FOR CONSERVATIVE JUDAISM IN ISRAEL - 475 RIVERSIDE DRIVE, SUITE 832 - NEW YORK, NY 10115	13-3137586 501(C)(3)	501(C)(3)	2,000.	0.	N/A	N/A	MAGEN AVRAHAM PLAYGROUND PROJECT
MAYO CLINIC, DEPT OF DEVELOPMENT 200 FIRST STREET SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	6,500.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MAYO CLINIC, DEPT OF DEVELOPMENT 201 FIRST STREET SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	20,000.	0.	N/A	N/A	SUPPORT FOR REGENERATIVE
MINNEAPOLIS HEART INSTITUTE FOUNDATION - 920 EAST 28TH STREET, SUITE 100 - MINNEAPOLIS, MN 55407	41-1426406 501(C)(3)	501(C)(3)	. 5,500,	0,	N/A	N/A	GENERAL OPERATING SUPPORT
MINNEAPOLIS PARKS FOUNDATION 4800 MINNEHAHA AVENUE S MINNEAPOLIS, MN 55417	20-0715686	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA CENTER FOR ENVIRONMENTAL ADVOCACY - 1919 UNIVERSITY AVE, SUITE 515 - ST PAUL, MN 55104	23-7412105	501(C)(3)	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA HILLEL 1521 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414	41-6038613	501(C)(3)	142,086.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA HILLEL 1521 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414	41-6038613	501(C)(3)	4,000.	0.	N/A	N/A	MOBILE TECHNOLOGY
MINNESOTA HILLEL 1521 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414	41-6038613 501(C)(3)	501(C)(3)	40,000.	0	N/A	N/A	ISRAEL FELLOWS PROGRAM
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Schedule I (Form 990) MINNEAPOLIS JEWISH FEDERAT	IS JEWISH	FEDERATION				4	41-0693866 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	Assistance to Gov	rernments and Organ	izations in the Uni	ited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II	π II)	
(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA LANDSCAPE ARBORETUM FOUNDATION - 3675 ARBORETUM DRIVE - CHASKA, MN 55318	23-7081057	501(C)(3)	7,700.	0	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA MASONIC CHARITIES 11501 MASONIC HOME DRIVE MINNEAPOLIS, MN 55437	41-1495325	501(C)(3)	7,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTA PUBLIC RADIO 480 CEDAR STREET ST PAUL, MN 55101	41-0953924	501(C)(3)	6,800.	0	N/A	N/A	GENERAL OPERATING SUPPORT
MINNESOTANS AGAINST TERRORISM P.O. BOX 368 HOPKINS, MN 55343	35-2162870	501(C)(3)	12,750.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
MOISHE HOUSE 441 SAXONY ROAD, BARN 2 ENCINITAS, CA 92024	35-2162870	501(C)(3)	37,500.	0	N/A	N/A	GENERAL OPERATING SUPPORT
NATIONAL CONFERENCE OF SYNAGOGUE YOUTH - 3200 W, TOUHY AVENUE - SKOKIE, IL 60076	13-5623717 501(C)(3)	501(C)(3)	10,925.	0	N/A	N/A	GENERAL OPERATING SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN MN - 13100 WAYZATA BLVD, SUITE 160 - MINNETONKA, MN 55305	41-0675915	501(C)(3)	4,800.	0	N/A	N/A	GENERAL OPERATING SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN MN - 13100 WAYZATA BLVD, SUITE 160 - MINNETONKA, MN 55305	41-0675915	501(C)(3)	2,500.	0	N/A	N/A	JUDAISM & ISRAEL ED FOR NON-JEWISH STAFF OF JEWISH ORGANIZATIONS
NATIONAL COUNCIL OF JEWISH WOMEN MN - 13100 WAYZATA BLVD, SUITE 160 - MINNETONKA, MN 55305	41-0675915	501(C)(3)	10,000.	. 0	N/A	N/A	SUPPORTING AT-RISK HOMELESS & HIGHLY MOBILE GIRLS PROJECT

Schedule I (Form 990)

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Schedule (Form 990) MINNEAPOLIS JEWISH FEDERA	IS JEWISH	FEDERATION				4	41-0693866 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	Assistance to Go	vernments and Organ	izations in the Un		(Schedule I (Form 990), Part II)	٦॥)	,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL TAY SACHS & ALLIED DISEASES ASSN INC 2001 BEACON STREET, SUITE 204 - BOSTON, MA 02135	13-1912877	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
NATURAL RESOURCES DEFENSE COUNCIL, INC 40 W 20TH STREET - NEW YORK, NY 10011	13-2654926 501(C)(3)	501(C)(3)	20,000.	.0	N/A	N/ A	GENERAL OPERATING SUPPORT
NECHAMA - JEWISH DISASTER RESPONSE 12219 NICOLLET AVENUE BURNSVILLE, MN 55337	41-1998750 501(C)(3)	501(C)(3)	25,750.	,0	N/A	N/A	GENERAL OPERATING SUPPORT
NEVE MICHAEL CHILDREN'S VILLAGE 1531 RUE VENDOME PEMBROKE PINES, FL 33026	20-8499330 501(C)(3)	501(C)(3)	10,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
NEW ISRAEL FUND P.O. BOX 177 LEWISTON, ME 04243	94-2607722 501(C)(3)	501(C)(3)	54,000.	.0	N/A	N/A	GENERAL OPERATING SUPPORT
OPERATION HOMEFRONT, INC. 1355 CENTRAL PARKWAY S SAN ANTONIO, TX 78232	32-0033325 501(C)(3)	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
PACER CENTER, INC. 8161 NORMANDALE BLVD S MINNEAPOLIS, MN 55437	41-1306304 501(C)(3)	501(C)(3)	77,750.	.0	N/A	N/A	GENERAL OPERATING SUPPORT
PACER CENTER, INC. 8161 NORMANDALE BLVD S MINNEAPOLIS, MN 55437	41-1306304	501(C)(3)	40,000.	•0	N/A	N/A	INNOVATION LAB - PACER'S SIMON TECH CTR
PARTNERS IN HEALTH 800 BOYLSTON STREET, SUITE 300 BOSTON, MA 02199	04-3567502 501(C)(3)	501(C)(3)	10,000.	. 0	N/A	N/A	GENERAL OPERATING SUPPORT
							Schedule I (Form 990)

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41-0693866 Schedule I (Form 990) MINNEAPOLIS JEWISH FEDERATION

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

(a) Name and address of corganization or government if applicated the corganization or government or government if application or government if application or government or government if application or government if app	(b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	tion (d) Amount of cash grant non-cash appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEF ISRAEL ENDOWMENT FUNDS, INC. 630 THIRD AVENUE, SUITE 1501 NEW YORK, NY 10017	13-6104086	501(C)(3)	10,900.	0.0	0. N/A	N/A	GENERAL OPERATING SUPPORT
PEOPLE SERVING PEOPLE, INC. 614 THIRD STREET SOUTH MINNEAPOLIS, MN 55415	41-1443148	501(C)(3)	5,500.	0	N/A	N/A	GENERAL OPERATING SUPPORT
PLANNED PARENTHOOD OF MN/ND/SD 671 VANDALIA STREET, SUITE 323 ST. PAUL, MN 55114	41-0948382	501(C)(3)	13,200.	0	N/A	N/A	GENERAL OPERATING SUPPORT
PROJECT FOR PRIDE IN LIVING, INC. 1035 EAST FRANKLIN AVENUE MINNEAPOLIS, MN 55404	23-7232208	501(C)(3)	5,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
PUBLIC CITIZEN FOUNDATION 1600 20TH STREET NW WASHINGTON, DC 20009	52-1263996 501(C)(3)	501(C)(3)	10,000.	0	N/A	N/A	GENERAL OPERATING SUPPORT
SABES JEWISH COMMUNITY CENTER 4330 S CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	41-0833543	501(C)(3)	43,798.	0	N/A	N/A	GENERAL OPERATING SUPPORT
SABES JEWISH COMMUNITY CENTER 4330 S CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	41-0833543	501(C)(3)	.000.	0	N/A	N/A	INCLUSION PROGRAMMING
SABES JEWISH COMMUNITY CENTER 4330 S CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	41-0833543	501(C)(3)	35,344.	0	N/A	N/A	SUMMER CAMP PROGRAM
SABES JEWISH COMMUNITY CENTER 4330 S CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	41-0833543 501(C)(3)	501(C)(3)	5,000.	0	N/A	N/A	АМРНІТНЕАТЕК
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Schedule I (Form 990) MINNEAPOLIS JEWISH FEDERAT	IS JEWISH	JEWISH FEDERATION		•			41-0693866 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	ton (d) Amount of (e) Amour cash grant assistan	1 7 75 0	t of (f) Method of (g) valuation noise (book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAVE THE CHILDREN 501 KINGS HIGHWAY EAST, SUITE 400 PAIRPIELD CT 06825	06-0726487	501(0)(3)	000 R.L	c	appraisal, other)	a 2	GRNERAL OPERATING SIDDORT
1 "" #	22-3342043	501(C)(3)	2,500.		N/A	N/A	GENERAL OPERATING SUPPORT
SCHECHTER INSTITUTES, INC. BOX 3566, PO BOX 8500 PHILADELPHIA, PA 19178	22-3342043	501(C)(3)	10,000.	0.	N/A	N/A	TALI EDUCATION FUND
SCIENCE MUSEUM OF MINNESOTA 120 W KELLOGG BLVD ST PAUL, MN 55102	41-0706172	501(C)(3)	7,750.	•0	N/A	N/A	GENERAL OPERATING SUPPORT
SCOTTSDALE CULTURAL COUNCIL 7380 EAST SECOND STREET SCOTTSDALE, AZ 85251	981660-98	501(C)(3)	.000,2	•0	N/A	N/A	GENERAL OPERATING SUPPORT
	23-7417654 501(C)(3)	501(C)(3)	26,500.	•0	N/A	N/A	GENERAL OPERATING SUPPORT
SHA'ARIM 2851 HEDBERG DRIVE MINNETONKA, MN 55305	41-1917521	501(C)(3)	.000,25	•0	N/A	N/A	DARKAYNU PROGRAM
SHA'ARIM 2851 HEDBERG DRIVE MINNETONKA, MN 55305	41-1917521	501(C)(3)	81,945.	•0	N/A	N/A	GENERAL OPERATING SUPPORT
SHA'ARIM 2851 HEDBERG DRIVE MINNETONKA, MN 55305	41-1917521 501(C)(3)	501(C)(3)	7,377.	°	N/A	N/A	FRIENDS 'N FUN PROGRAM
							Schedule I (Form 990)

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Schedule (Form 990) MINNEAPOLIS	IS JEWISH	FEDERATION				Ì	41-0693866 Page 1
(a) Name and address of (b) EIN (c) IRC sect angustation or government if applicable if applicable is a sect and a sect a	(b) EIN	(c) IRC section of applicable	ton (d) Amount of (e) Amour cash grant non-cash	1 7 75 1	t of (f) Method of (c) valuation no	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
				assistance	(book, riviv, appraisal, other)		,
SHADES, LLC 500 NEW JERSEY AVENUE, NW, STE 800 WASHINGTON, DC 20001	47-2289205	501(C)(3)	11,800.	0	Y/N	4 2	GENERAL OPERATING SUPPORT
SHIR TIKVAH CONGREGATION 1360 W MINNEHAHA PKWY MINNEAPOLIS, MN 55419	41-1632627	501(C)(3)			N/A	ď/v	
SHOLOM COMMUNITY ALLIANCE 3620 PHILLIPS PARKWAY ST LOUIS PARK, MN 55426	41-1837022 501(C)(3)	501(C)(3)	41,963.	0	N/A	N/A	OPERATING
SHOLOM FOUNDATION 3610 PHILLIPS PARKWAY ST LOUIS PARK, MN 55426	36-3411361	501(C)(3)	31,069.	0	N/A	N/A	GENERAL OPERATING SUPPORT
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DRIVE LOS ANGELES, CA 90035	95-3964928	501(C)(3)	5,250.	0	N/A	N/A	OPERATING
ST PAUL CHAMBER ORCHESTRA SOCIETY 408 ST. PETER STREET THIRD FLOOR ST PAUL, MN 55102	41-0829498	501(C)(3)	7,750.	0	N/A	N/A	GENERAL OPERATING SUPPORT
ST. CROIX RIVER ASSOCIATION P.O. BOX 934 STILLWATER, MN 55082	26-3025933	501(C)(3)	6,200.	0	N/A	N/A	POLLINATOR FRIENDLY ALLIANCE
STEP-ST LOUIS PARK EMERGENCY PROGRAM - 6812 W LAKE STREET - ST LOUIS PARK, MN 55426	51-0188692	501(C)(3)	6,400.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
TALMUD TORAH OF MINNEAPOLIS 4330 SOUTH CEDAR LAKE ROAD ST LOUIS PARK, MN 55416	41-0714419 501(C)(3)	501(C)(3)	213,200.	0	N/A	N/A	GENERAL OPERATING SUPPORT
							Schedule I (Form 990)

JEWISH FEDERATION	41-0693866	Page 1
stance to Governments and Organizations in the United States (Schedule Form 990) Part II)		

Schedule I (Form 990) MINNEAPOLIS JEWISH FEDERATION Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	IS JEWISH	FEDERATION	izations in the Uni		(Schedule I (Form 990) Part II.)		41-0693866 Page 1
	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	1 7 % 0	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE ISRAEL 2323 FREMONT AVENUE S MINNEAPOLIS, MN 55405	41-1769841	501(C)(3)	10,000.	0.	N/A	N/A	CAMP SCHOLARSHIPS
TEMPLE ISRAEL 2323 FREMONT AVENUE S MINNEAPOLIS, MN 55405	41-1769841	501(C)(3)	325,751.	0	N/A	N/A	GENERAL OPERATING SUPPORT
TEMPLE ISRAEL 2323 FREMONT AVENUE S MINNEAPOLIS, MN 55405	41-1769841	501(C)(3)	25,000.	•0	N/A	N/A	BUILDING FUND
TORAH ACADEMY OF MINNEAPOLIS 2800 JOPPA AVE SOUTH ST LOUIS PARK, MN 55416	41-6007486	501(C)(3)	298,547.	0.0	N/A	N/A	GENERAL OPERATING SUPPORT
TRACTORS FOR AFRICA 16822 GRAYS BAY BLVD WAYZATA, MN 55391	61-1804299 501(C)(3)	501(C)(3)	.000,2	.0	N/A	N/A	GENERAL OPERATING SUPPORT
TWIN CITIES PUBLIC TELEVISION INC 172 E 4TH STREET ST PAUL, MN 55101	41-0769851	501(C)(3)	6,300.	.0	N/A	N/A	GENERAL OPERATING SUPPORT
UNITED PAMILY MEDICINE 1026 WEST 7TH STREET ST PAUL, MN 55102	27-0052697	501(C)(3)	10,000.	0.	N/A	N/A	INCREASING QUALITY CARE FOR PATIENTS W/LIMITED ENGLISH PROFICIENCY PROGRAM
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	. 200.	.0	N/A	N/A	MASONIC CANCER CENTER FOR JAY WEINBLATT MEMORIAL
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488 501(C)(3)	501(C)(3)	2,000.	.0	N/A	N/A	WEISMAN ART MUSEUM
							Schedule I (Form 990)

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Schedule I (Form 990) MINNEAPOLIS	IS JEWISH	JEWISH FEDERATION			!	1	41-0693866 Page 1
(a) Name and address of (b) EIN (c) IRC sect organization or government if applicab	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(schilled States (Schilled) (e) Amount of non-cash assistance	to cash grant assistance (book, FMV), Part II.	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	1,000	o	appraisal, other)	e/N	AMOS S DEINARD MEMORIAL CHAIR IN JEWISH HISTORY
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	1,000.	0	N/A	N/A	BLADDER CANCER RESEARCH & EDUCATIONAL FUND
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	. 20,000	0.	N/A	N/A	ENSIA-INST ON THE
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	2,000.	0.	N/A	N/A	INTERNATIONAL HEARING ASSOCIATION
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	.000,2	0	N/A	N/A	PROFESSORSHIP IN SEXUALITY & AGING
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	1,000.	.0	N/A	N/A	CARLSON SCHOOL OF
UNIVERSITY OF MINNESOTA FOUNDATION PO BOX 860266 MINNEAPOLIS, MN 55486	41-6042488	501(C)(3)	.000,08	0.	N/A	N/A	CEREAL DISEASE RESEARCH
UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE ST PAUL, MN 55105	41-0693970	501(C)(3)	5,000.	0.	N/A	N/A	DOUGHERTY FAMILY COLLEGE
WASHBURN CENTER FOR CHILDREN 1100 GLENWOOD AVENUE MINNEAPOLIS, MN 55405	41-0711618	501(C)(3)	11,750.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
							Schedule I (Form 990)

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41-06938 MINNEAPOLIS JEWISH FEDERATION Schedule I (Form 990) MINNEAPOLIS JEWISH F)

Part II Continuation of Grants and Other Assistance to Govern

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II)	Assistance to Gov	rernments and Organ	izations in the Uni	ited States (Sche	dule I (Form 990), Par	t II)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON INSTITUTE FOR NEAR EAST POLICY - 1111 - 19TH STREET NW, SUITE 500 - WASHINGTON, DC 20036	52-1376034	501(C)(3)	10,000.	0	N/A	Y/N	GENERAL OPERATING SUPPORT
WORLD RESOURCES INSTITUTE 10 G STREET NE, SUITE 800 WASHINGTON, DC 20002	52-1257057	501(C)(3)	20,000.	0.	N/A	N/A	GENERAL OPERATING SUPPORT
YESHIVA OF MINNEAPOLIS 3115 OTTOWA AVENUE S MINNEAPOLIS, MN 55416	45-2697278	50 <u>1</u> (C)(3)	10,500.	0	N/A	Y/9	GENERAL OPERATING SUPPORT
YOUNG ISRAEL AISH OF LAS VEGAS 9590 W SAHARA AVE LAS VEGAS, NV 89117	88-0348899	501(C)(3)	906,715.	0	N/A	N/A	GENERAL OPERATING SUPPORT
YOUNG JUDEA GLOBAL INC 575 EIGHTH AVENUE, 11TH FLOOR NEW YORK, NY 10038	45-2640858	\$01(C)(3)	26,500.	0	N/A	N/A	GENERAL OPERATING SUPPORT
YWCA OF MINNEAPOLIS 1130 NICOLLET MALL MINNEAPOLIS, MN 55403	41-0693891	501(C)(3)	25,000.	0	N/A	N/A	POWER TO SOAR LEGACY
YWCA OF MINNEAPOLIS 1130 NICOLLET MALL MINNEAPOLIS, MN 55403	41-0693891	501(C)(3)	5,000.	0	N/A	N/A	CIRCLE OF WOMEN
							Schedule I (Form 990)

732241 04-01-17 MINNEAPOLIS JEWISH FEDERATION Schedule I (Form 990) (2017) Part III

Page 2

41-0693866

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

٧į (f) Description of noncash assistance N/A N/A (e) Method of valuation (book, FMV, appraisal, other) THE FEDERATION DESIGNATES THE INTENDED USE OF Part IV Supplemental Information. Provide the information required in Part II, line 2; Part III, column (b), and any other additional information THE FUNDS. THE FEDERATION CONDUCTS NO FURTHER MONITORING OF THE FUNDS. 0.N/A 0. N/A (d) Amount of non-cash assistance 672. 222,139. (c) Amount of cash grant (b) Number of recipients 397 AT THE TIME A GRANT IS MADE, (a) Type of grant or assistance PART I, LINE 2: CAMP SCHOLARSHIPS PROGRAM GRANTS

732102 11-01-17

Schedule I (Form 990) (2017)

SCHEDULE J (Form 990)

Compensation Information

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

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

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

2017 Open to Public

Inspection

OMB No 1545-0047

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

MINNEAPOLIS_JEWISH FEDERATION

Employer identification number

41-0693866

Part \	Fravel for companions	<u> </u>			
b If any reimb	First-class or charter travel Fravel for companions	Housing allowance or residence for personal use			i
b If any reimb	Fravel for companions	·			i i
b If any reimb		Payments for business use of personal residence	l		
b If any reimb	Tax indemnification and gross-up payments				
b If any reimb		Health or social club dues or initiation fees			
reimb	Discretionary spending account	Personal services (such as, maid, chauffeur, chef)			
reimb					
	of the boxes on line 1a are checked, did the organization follow a	a written policy regarding payment or			
2 Did th	ursement or provision of all of the expenses described above? If '	"No," complete Part III to explain	1b		<u> </u>
	e organization require substantiation prior to reimbursing or allow	ving expenses incurred by all directors,			
truste	es, and officers, including the CEO/Executive Director, regarding	the items checked on line 1a?	2		
3 Indica	te which, if any, of the following the filing organization used to es	tablish the compensation of the organization's			ĺ
CEO/	Executive Director Check all that apply Do not check any boxes	for methods used by a related organization to			
	ish compensation of the CEO/Executive Director, but expla <u>in in</u> F	Part III			
X (Written employment contract			ĺ
<u></u>	ndependent compensation consultant	Compensation survey or study		ĺ	
F	form 990 of other organizations	Approval by the board or compensation committee			
4 During	the year, did any person listed on Form 990, Part VII, Section A,	line 1a, with respect to the filing			
organ	zation or a related organization:				لــــــا
a Recei	ve a severance payment or change-of-control payment?		4a		X
b Partic	pate in, or receive payment from, a supplemental nonqualified re	tirement plan?	4b		X
	pate in, or receive payment from, an equity-based compensation	•	4c		X
If "Ye:	" to any of lines 4a-c, list the persons and provide the applicable	amounts for each item in Part III			.
	section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must				.
	ersons listed on Form 990, Part VII, Section A, line 1a, did the orgi	anization pay or accrue any compensation			
	gent on the revenues of		_		
	rganization?		5a		X
-	lated organization?		5b		^
	" on line 5a or 5b, describe in Part III				
	ersons listed on Form 990, Part VII, Section A, line 1a, did the organization the anti-control of the control o	anization pay or accrue any compensation			
_	gent on the net earnings of				_ _
	ganization?		6a	-	X
-	lated organization?		6b		-^ -
	s" on line 6a or 6b, describe in Part III	to-		Ī	
	ersons listed on Form 990, Part VII, Section A, line 1a, did the organized on lines 5 and 62 K IIV.	anization provide any nontixed payments	 		 -l
	scribed on lines 5 and 6? If "Yes," describe in Part III		7		X
	any amounts reported on Form 990, Part VII, paid or accrued pure				~
		• •	8	-	^
9 if Yes Regula	o on the o, old the organization also follow the reputtable presum	nption procedure described in			
initial o	contract exception described in Regulations section 53 4958-4(a) on line 8, did the organization also follow the rebuttable presum	(3)? If "Yes," describe in Part III	8		<u>X</u>

732111 10-17-17

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

Schedule J (Form 990) 2017

MINNEAPOLIS JEWISH FEDERATION Schedule J (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 aren't 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

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	ble	(E) Total of columns	F.
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benetits	(a)(b)	in column (B) reported as deferred on prior Form 990
	€	223,65	0	1,865.	3,49	23,025.	252,03	0
CHIEF OPERATING OFFICER - PART YEAR	3	0	0	0.	0	0	0.	• 0
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732113 10-17-17

SCHEDULE M . (Form 990)

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

MINNEAPOLIS JEWISH FEDERATION

Attach to Form 990.

41-0693866 Types of Property Part T (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1a Art - Works of art 2 Art - Historical treasures 3 Art · Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes 8 Intellectual property 5,029,724. FAIR MARKET VALUE X 129 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests 12 Securities · Miscellaneous 13 Qualified conservation contribution -Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies

26 Other > 27 Other 28 Other > Number of Forms 8283 received by the organization during the tax year for contributions

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 isn't required to be used for

exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

for which the organization completed Form 8283, Part IV, Donee Acknowledgement

b If "Yes," describe in Part II

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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No

Yes

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

(NOTE RECEIVAB)

Schedule M (Form 990) 2017

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Taxidermy

Historical artifacts

Scientific specimens Archeological artifacts

550,000.FAIR MARKET VALUE

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Part	SI SI	upple reportii		nfor , colu	mation. mn (b), the	Provid	de the informa er of contribu				32b, a ed, or a			ther the organ f both Also co	Page 2 ization implete
SCH	EDULE	М,	PART	I,	COLUI	<u>/IN (</u>	B):								···
THE	ORGA	NIZ	ATION	RE:	PORTS	THE	NUMBER	OF	CONTR	IBUTORS	ON	PART	I,	COLUMN	
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Schedule M (Form 990) 2017

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

MINNEAPOLIS JEWISH FEDERATION	41-0693866
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	SION:
PROMOTE A CULTURE OF PHILANTHROPY, LEVERAGE RESOURCES TO M	MEET LOCAL AND
GLOBAL JEWISH NEEDS AND FACILITATE COMMUNITY PLANNING TO E	ENSURE A
THRIVING AND SECURE FUTURE.	
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMEN	NTS:
PLEASE SEE THE 2018 IMPACT REPORT AT	
WWW.JEWISHMINNEAPOLIS.ORG/WHO-WE-ARE/NUMBERS.	
FORM 990, PART VI, SECTION A, LINE 1:	
THE FEDERATION HAS AN EXECUTIVE COMMITTEE, COMPRISED ENTIR	RELY OF VOTING
MEMBERS OF THE BOARD OF DIRECTORS, WITH POWER TO TRANSACT	ALL REGULAR
BUSINESS OF THE FEDERATION DURING THE PERIOD BETWEEN MEETI	NGS OF THE BOARD
OF DIRECTORS, SUBJECT TO ANY PRIOR LIMITATION IMPOSED BY T	THE BOARD OF
DIRECTORS AND SUBJECT TO THE ULTIMATE DIRECTION AND CONTRO	OL OF THE BOARD.
AUTHORITY OVER THE FOLLOWING MATTERS IS RETAINED BY THE BO	ARD OF DIRECTORS
AND IS NOT DELEGATED TO THE EXECUTIVE COMMITTEE:	
1. THE DISTRIBUTION OF THE PROCEEDS OF THE FEDERATION'S AN	NUAL CAMPAIGN
AMONG THE FEDERATION'S BENEFICIARY AGENCIES AND OTHER RECI	PIENTS;
2. THE ELECTION OF THOSE OFFICERS OF THE FEDERATION WHO AF	RE CHOSEN BY THE

- ANY AMENDMENT TO THE BYLAWS OR ARTICLES OF INCORPORATION OF THE
- LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

OF THE FEDERATION'S PROPERTY AND ASSETS;

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

732211 09-07-17

BOARD;

3. ANY DECISION TO ENTER INTO A MERGER OR CONSOLIDATION WITH ANOTHER ENTITY

TO SELL, LEASE, TRANSFER, OR OTHERWISE DISPOSE OF ALL OR SUBSTANTIALLY ALL

Employer identification number Name of the organization 41-0693866 MINNEAPOLIS JEWISH FEDERATION FEDERATION; AND 5. ANY ELECTION TO FILL A VACANCY AMONG THE DIRECTORS. FORM 990, PART VI, SECTION A, LINE 2: JACY GRAIS AND JASON GRAIS - FAMILY RELATIONSHIP JOSH ZAMANSKY AND RORY ZAMANSKY - FAMILY RELATIONSHIP DEBBIE GOLDENBERG AND BRIAN LIPSCHULTZ - FAMILY RELATIONSHIP FORM 990, PART VI, SECTION A, LINE 6: THE FEDERATION'S MEMBERS CONSIST OF ANY INDIVIDUAL WHO IS AT LEAST 18 YEARS OLD AND WHO HAS PLEDGED OR CONTRIBUTED AT LEAST \$10 TO THE MOST RECENTLY COMPLETED ANNUAL GENERAL CAMPAIGN. FORM 990, PART VI, SECTION A, LINE 7A: SELECTION OF THE FOLLOWING DIRECTORS REQUIRES THE APPROVAL OF THE MEMBERS: 1. ONE RABBINIC REPRESENTATIVE RECOMMENDED BY THE NOMINATING SUB-COMMITTEE AND APPROVED BY THE MEMBERS; ONE REPRESENTATIVE OF THE BOARD CHAIRS OR PRESIDENTS OF THE PARTNER AGENCIES RECOMMENDED BY THE NOMINATING SUB-COMMITTEE AND APPROVED BY THE MEMBERS; 3. ONE REPRESENTATIVE OF THE CHIEF EXECUTIVE OFFICERS OF THE PARTNER AGENCIES RECOMMENDED BY THE NOMINATING SUB-COMMITTEE AND APPROVED BY THE MEMBERS; 4. FIVE DIRECTORS-AT-LARGE RECOMMENDED BY THE NOMINATING SUB-COMMITTEE AND APPROVED BY THE MEMBERS; 5. UP TO THREE CAMPAIGN REPRESENTATIVES RECOMMENDED BY THE NOMINATING SUB-COMMITTEE AND APPROVED BY THE MEMBERS;

Scriedule O (Form 990 of 990 EZ) (2017)	· · · · · · · · · · · · · · · · · · ·
Name of the organization MINNEAPOLIS JEWISH FEDERATION	Employer identification number 41-0693866
6. UP TO FIVE PRESIDENTIAL APPOINTMENTS RECOMMENDED BY THE	PRESIDENT AND
APPROVED BY THE NOMINATING SUB-COMMITTEE AND MEMBERS;	
7. ONE REPRESENTIVE OF THE FEDERATION'S YOUNG ADULT PROGRA	MMING RECOMMENDED
BY THE NOMINATING SUB-COMMITTEE AND APPROVED BY THE MEMBER	S; AND
8. ASSISTANT TREASURER RECOMMENDED BY THE NOMINATING COMMI	TTEE AND APPROVED
BY THE MEMBERS.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS REVIEWED BY THE ORGANIZATION'S CHIEF FINAN	CIAL OFFICER. IT
IS THEN REVIEWED AND APPROVED BY THE FINANCE COMMITTEE OF	THE ORGANIZATION.
THE FINANCE COMMITTEE IS MADE UP OF INDEPENDENT MEMBERS OF	THE BOARD OF
DIRECTORS AND INDIVIDUAL LAY LEADERS OF THE COMMUNITY. THE	
PUBLIC INSPECTION COPY OF THE FORM 990 IS THEN PROVIDED TO	ALL BOARD
MEMBERS PRESENT AT A BOARD MEETING PRIOR TO THE FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO	ALL BOARD MEMBERS
AND STAFF. COVERED INDIVIDUALS ARE REQUIRED TO COMPLETE AN	ANNUAL
DISCLOSURE FORM.	
INDIVIDUALS ARE REQUIRED TO FULLY DISCLOSE THE SPECIFIC NA	TURE OF ANY
INTEREST OR INVOLVEMENT THAT MAY RESULT IN A CONFLICT. THE	PRESIDENT (OR
CHAIR OF ANY COMMITTEE OF THE BOARD ENTRUSTED WITH MINNEAP	OLIS JEWISH
FEDERATION OVERSIGHT OF CONFLICTS OF INTEREST) SHALL REPOR	T TO THE BOARD,
AT LEAST ANNUALLY, LISTING ALL CONFLICTS OF INTEREST DISCL	····
IDENTIFYING ALL CONFLICTS THAT WERE WAIVED. UNLESS OTHERWI	

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

THE BOARD, AN INDIVIDUAL WITH A CONFLICT IS REQUIRED TO REFRAIN FROM

PARTICIPATING IN CONSIDERATION OF THE TRANSACTION. ANY PERSON OR PERSONS

Schedule O (Form 990 or 990-EZ) (2017) **Employer identification number** Name of the organization 41-0693866 MINNEAPOLIS JEWISH FEDERATION INVOLVED SHALL NOT VOTE ON SUCH MATTERS AND SHALL NOT BE PRESENT AT THE TIME OF THE VOTE. THE CONFLICT OF INTEREST ACTIONS ARE DOCUMENTED IN THE MEETING MINUTES. FORM 990, PART VI, SECTION B, LINE 15A: THE COMPENSATION OF THE CEO IS SET BY WRITTEN AGREEMENT AND REVIEWED PERIODICALLY BY THE PERSONNEL AND COMPENSATION COMMITTEE OF MINNEAPOLIS JEWISH FEDERATION, WHICH CONSIST OF THREE (3) OR MORE INDEPENDENT BOARD MEMBERS. THE COMMITTEE'S PROCESS TO EVALUATE THE COMPENSATION OF THE CEO TAKES INTO ACCOUNT (AMONG OTHER MATTERS) THE COMPENSATION DATA PUBLISHED LOCALLY FOR THE TOP 100 NON-PROFIT ORGANIZATIONS, COMPENSATION DATA FOR SIMILAR SIZED JEWISH FEDERATIONS IN OTHER COMMUNITIES, AND CURRENT ECONOMIC CONDITIONS. THIS PROCESS WAS LAST DONE IN 2017. FORM 990, PART VI, SECTION B, LINE 15B: COMPENSATION FOR OTHER OFFICERS IS SET BY THE CHIEF EXECUTIVE OFFICER AND IS REVIEWED WITH THE TREASURER, AN INDEPENDENT BOARD MEMBER. COMPENSATION IS BENCHMARKED PERIODICALLY AGAINST COMPENSATION DATA FOR SIMILAR SIZED JEWISH FEDERATIONS IN OTHER COMMUNITIES. THIS PROCESS WAS LAST DONE IN 2017 FOR THE INCOMING CFO. FORM 990, PART VI, SECTION C, LINE 19: THE FEDERATION'S ANNUAL REPORT AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE. THE FEDERATION'S CONFLICT OF INTEREST POLICY AND

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS

-11,356.

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

2017

OMB No 1545-3047

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

Open to Public Inspection

Employer identification number 41-0693866

MINNEAPOLIS JEWISH FEDERATION Name of the organization

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Part

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
JCF CONDO HOLDINGS, LLC 111 CHESHIRE LANE, STE 50 MINNETONKA, MN 55305	HOLDING AND SELLING REAL ESTATE DONATIONS	MINNESOTA	0	0	MINNEAPOLIS JEWISH 0. FEDERATION
Part II Identification of Related Tax-Exempt Organizations. Complete if organizations during the tax year	ations. Complete if the organization an	the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt	rt IV, line 34, becaus	e it had one or more	related tax-exempt

(a)	(q)	(c)	(p)	(e)	(j)	(6)	1
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)	(0)(13) led
of related organization		foreign country)	section	status (if section	entity	entity?	,
				501(c)(3))		Yes	No
JEWISH COMMUNITY BUILDING CORPORATION -							
41-1933056, 111 CHESHIRE LANE, STE 50,	SUPPORT MINNEAPOLIS JEWISH				MINNEAPOLIS		
MINNETONKA, MN 55305	FEDERATION	MINNESOTA	501(C)(25)	N/A	JEWISH PEDERATION	×	
KELEN FAMILY FOUNDATION - 41-1854293							
4900 IDS TOWER, 80 S EIGHTH STREET	SUPPORT MINNEAPOLIS JEWISH				MINNEAPOLIS		
MINNEAPOLIS, MN 55402	FEDERATION	MINNESOTA	501(C)(3)	LINE 12A, I	JEWISH FEDERATION	×	
EFFRESS-MILLER FAMILY FOUNDATION -				=			
41-1781993, 8545 AVENIDA DE LAS ONDAS, LA	SUPPORT MINNEAPOLIS JEWISH		_		MINNEAPOLIS		
JOLLA, CA 92037	PEDERATION	MINNESOTA	501(C)(3)	LINE 12A, I	JEWISH PEDERATION	×	
THE JUDITH AND MICHAEL BERMAN FOUNDATION -							
26-0181739, 111 CHESHIRE LANE, STE 50,	SUPPORT MINNEAPOLIS JEWISH				MINNEAPOLIS		
MINNETONKA, MN 55305	FEDERATION	MINNESOTA	501(C)(3)	LINE 12A, I	JEWISH FEDERATION	X	

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

Schedule R (Form 990) 2017

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Schedule R (Form 990) MINNEAPOLIS JI	MINNEAPOLIS JEWISH FEDERATION	j			41-0693866	991	ارد دن
of Iden	Exempt Organizations						
(a)	(q)	(0)	(P)	(e)	(a)	(6)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct	Section 512(b)(13 controlled	f2(b)(13) biled
		ioreign country)		501(c)(3))		Yes	No
ARRON STEINFELDT FOUNDATION							
13-4228266, 240 BRIDLE LANE, HOPKINS, MN 55305	FEDERATION	MINNESOTA	501(C)(3)	LINE 12A I	MINNEAPOLIS JEWISH FEDERATION	×	
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41-0693866

Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Schedule R (Form 990) 2017 MINNEAPOLIS JEWISH FEDERATION Part III

(k)	General or Percentage managing ownership																	
S	eral or F aging tner?	Yes No																
	man man par	χeς (_				_				
į	amount in box	1065																1 4
ε :	Code V-UBI Imount in bo	Forn																1
		ξ																1
(h)	Disproportionate allocations?	Š																
=	Disprop alloca	Yes																1
	- <u>j</u> a		 															8
(6)	Share of end-of-year	สรรสเร																
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	<u></u>																	1 - / / / / /
Œ,	Share of total income																	
,	Share																	
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	related	2-514																
(e)	minani ed, un	ons 51																3
	Predominant income (related, unrelated, excluded from tax under	secti																:
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<u> </u>	Direct controlling entity																	Ι,
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	Name, address, and EIN of related organization																	
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Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

									١
(a)	(p)	(2)	(g)	(e)	ε	(6)	Ξ	Ξ	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling Type of entity (C corp, S corp, or trust)	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(b)(13) controlled entity?	(2) (eq
		country)		,				Yes	ę
SPLIT INTEREST TRUSTS (11)									
111 CHESHIRE LANE, STE 50				,					
MINNETONKA, MN 55305	INVESTMENT	MN	N/A	TRUST	N/A	N/A	N/A	×	
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Schedule R (Form 990) 2017

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Page 3

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- 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?
- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)

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- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)
- 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 0

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) OREN AND SHARRON STEINFELDT FOUNDATION	ບ	152,000.	152,000.CASH TRANSFERRED
(2) KELEN FAMILY FOUNDATION	υ	14,000.	14,000. CASH TRANSFERRED
(3) THE JUDITH AND MICHAEL BERMAN FOUNDATION	υ	10,000.	10,000. CASH TRANSFERRED
(4) EFRESS-MILLER FAMILY FOUNDATION	υ	5,000.	5,000. CASH TRANSFERRED
(5) JEWISH COMMUNITY BUILDING CORPORATION	E	559,016.	559,016.CASH RECEIVED/PAID

732163 09-11-17

41-0693866

Page 4

Schedule R (Form 990) 2017 MINNEAPOLIS JEWISH FEDERATION

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

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

	¥	Percentage ownership																							
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	<u> </u>	Gene	Yes No										1					_							
	(e)	Disproper Code V-UBI General or Percentage librations? of Schedule K-1 of Sche	(1001)																						
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	Ξ,	allocati	Yes										I			I									
	(6)	Share of end-of-year assets																							
	€ ;	Share of total income																		-					
	(e)	S01(c)(3) orgs ?	Yes	 _	ļ	_	•	Ė			F	 _	†	_		#									
- 1	(g)	redominant income particle (related, excluded from tax under excluded from tax under excluded from 512-514)	366110113 5 15-5 14)																						
sion for certain inver		Legal domicile (state or foreign country)																							
ructions regarding excius	(a)	Primary activity																							
that was not a related organization, see instructions regarding exclusion for certain investment partnerships	(a)	Name, address, and EIN of entity																							

Schedule R (Form 990) 2017

Schedule R	(Form 990) 2017	MINNEAPOLIS	JEWISH	FEDERATION	41-0693866	Page 5
Part VII	(Form 990) 2017 Supplemental Info	rmation.				
	Provide additional inform	nation for responses to due	estions on Sch	nedule R See instructions		
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